DOCUMENT RESUME

ED 393 241 EC 304 685

AUTHOR	Kellogg, Ann
TITLE	Guidelines for Conducting Functional Vocational Evaluations (Including Sample/Example Formats). Revised.
INSTITUTION	Wisconsin State Dept. of Public Instruction, Madison.
SPONS AGENCY	Office of Special Education and Rehabilitative Services (ED), Washington, DC.
PUB DATE	Nov 95
CONTRACT	H158A30014-94
NOTE	272p.; Product of Wisconsin's Design for Transition Success Project.
AVAILABLE FROM	Exceptional Education Team, Wisconsin Department of Public Instruction, P.O. Box 7841, Madison, WI 53707-7841.
PUB TYPE	Guides - Non-Classroom Use (055) -- Tests/Evaluation Instruments (160)
EDRS PRICE	MF01/PC11 Plus Postage.
DESCRIPTORS	Agency Cooperation; *Career Counseling; Career Exploration; Compliance (Legal); *Disabilities; Educational Legislation; *Evaluation Methods; Individualized Programs; Interest Inventories; Interviews; Models; Program Development; Records (Forms); Secondary Education; Sequential Approach; Situational Tests; *Student Evaluation; Transitional Programs; *Vocational Evaluation; Vocational Interests
IDENTIFIERS	*Functional Assessment; Functional Job Analysis; Individuals with Disabilities Education Act

ABSTRACT

This manual provides a sequential procedure for conducting functional vocational evaluations for secondary school students as required by the Individuals with Disabilities Education Act. This evaluation procedure considers the interactions of the student with instructors, peers, and employers; training needs; work demands; environmental factors; and necessary adaptations. The model proposed involves a five-step progression of assessment appropriate for use with middle and secondary level students with disabilities. At each stage of the process, a counseling session is held with the student to determine if enough information has been provided to design an appropriate career education and vocational program. If not, the process proceeds to the next more involved stage of information gathering. A flow chart illustrates the sequence. The five stages are: (1) orientation/interview; (2) observation, inventories, and record reviews; (3) career exploration; (4) situational assessment; and (5) multi-agency planning and assessment. Sample forms, questionnaires, and interview protocols are provided for use in implementing the process. An appendix provides additional forms, formats, and lists. (Contains 28 references.) (DB)

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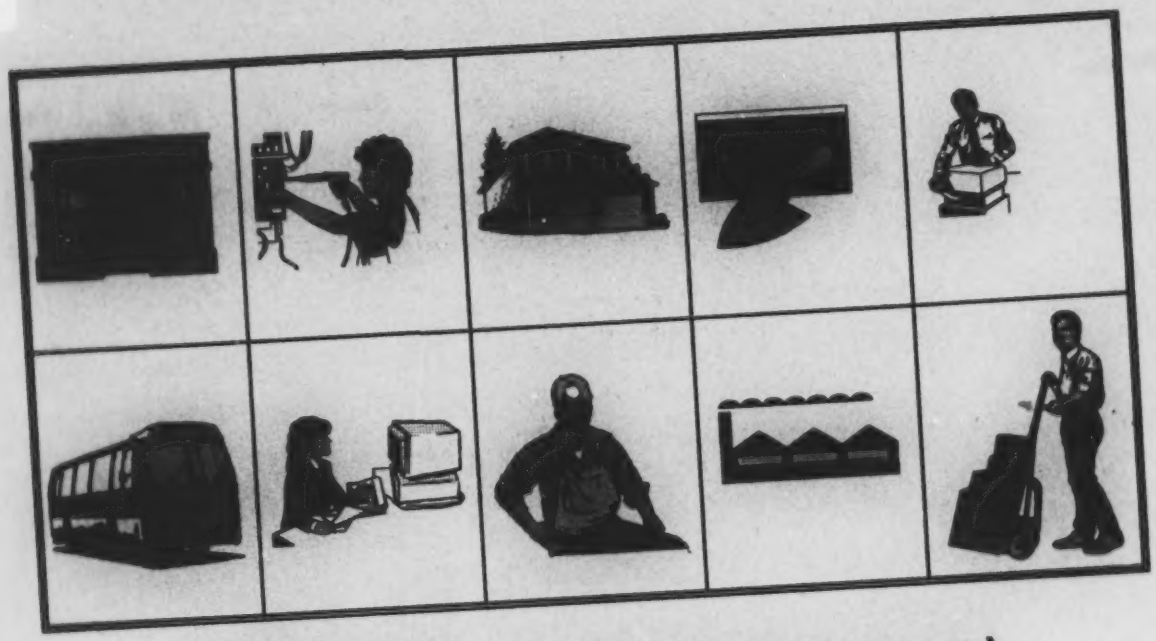
ED 393 241

GUIDELINES FOR CONDUCTING FUNCTIONAL VOCATIONAL EVALUATIONS



(Including Sample/Example Formats)

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REVISED NOVEMBER, 1995

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Revised November, 1995

Funded in part by
OSERS/US Department of Education, Grant #H158A30014-94 under the
Individuals with Disabilities Education Act.

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ACKNOWLEDGMENTS

Many of the forms and procedures described in this guide were developed by districts and CESAs in Wisconsin and are being used to implement transition services and functional evaluations for youth with disabilities. Most of these schools produced the functional evaluation material as part of a DPI IDEA transition discretionary grant or a DPI/DVR Wisconsin's Design for Transition Success Project grant. We would like to thank them all for their commitment to the development of effective transition services for youth with disabilities and for their creativity, diligence, and accomplishments.

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CESA #1

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GUIDELINES FOR CONDUCTING FUNCTIONAL VOCATIONAL EVALUATIONS

ADAPTED BY ANN KELLOGG, TRANSITION CONSULTANT, WI DPI

Definition of the Term

The Individuals with Disabilities Education Act requires school districts to conduct functional vocational evaluations for all students with exceptional educational needs, at least by age sixteen, if appropriate, as one component of their mandated transition services of "instruction, community experiences, employment and other post-school adult living objectives, and acquisition of daily living skills."

Another definition of "functional" assessment is the popular term, "authentic" assessment. For many students with disabilities, standardized vocational assessment, including interest inventories, are invalid, unreliable and in some cases, discriminatory against the student's disability. In the arena of vocational assessment, the evaluation's purpose must be to improve the services to a student with disabilities to facilitate the student's completion of a vocational education program, not to exclude him/her. The assessment must focus on: the interactions of the student with instructors, peers, employers; training needs; work demands; environmental considerations; and necessary adaptations.

There is no magic recipe for a functional vocational evaluation since it is based on the concept of measuring student performance on actual job tasks or vocational activities in the natural environment where the activity occurs. The special educator should have the evaluation skills to spearhead the assessment process. For those occupationally specific tasks, the assessment should be guided by the special educator but conducted by the vocational educator or employer. The functional vocational assessment should provide information about the student's preferences, behavior, learning style, need for assistive devices, initiative, communication needs, physical and mental endurance, medical status, transportation needs, specific work skills, and specific methods of training and instruction needed.

All functional vocational evaluations should be conducted within the context of the M-Team evaluation and IEP:

- be recorded in the "present levels of performance," or "evaluation" sections of the IEP document;
- be utilized to measure student progress, appropriateness of program, need for modifications in program to enhance student success, and match and place students in appropriate vocational/work placements;
- be communicated to students and parents to assist them to understand

- their strengths, limitations, the job market, and make career decisions; and be discussed with family, instructors, guidance counselors, employers and community service staff to provide necessary supports and adaptations for successful vocational experiences.

**Even before the implementation of the Education of the Handicapped Act, unique vocational services for students with disabilities had been developed. However, these services were not always based upon individual vocational needs and the field recognized the need for a comprehensive vocational assessment process. This process provides benefits for students in terms of planning and placement decisions, and in growth in confidence and maturity through the world of work.

With IDEA's functional vocational assessment mandates of 1990, vocational assessment of students with disabilities continues to demand the attention of vocational and special educators. The Carl Perkins Act includes provisions for students with disabilities to have vocational assessment prior to program placement, and to have access to and receive the support necessary to be successful in vocational education programs. However, difficulties remain the development of a consistent vocational assessment process that is beneficial and useful to teachers, parents and students with disabilities.

Vocational assessment can be broadly defined as the process of gathering information about a student's skills, interests, abilities, and performance in order to make appropriate vocational education and/or placement decisions.

The need for vocational assessment procedures for students with disabilities has been well documented in the literature (Peterson, 1995; Stodden, 1981; Treichel, 1982). Various models have depicted vocational assessment as part of IEP development (Phelps and McCarty, 1984) as well as for determining vocational placement of students. Different models have described a vocational evaluation center (Nadolsky, 1972), curriculum based models of vocational assessment (Cobb, 1983), and a comprehensive model of vocational assessment as described by Peterson and Hill (VOC-AIM, 1982) and Lombard (1993). Several of these models discuss formal evaluation that includes standardized testing and work samples which are often time consuming and are not always relevant to a student's needs. Hartley and Lehman (1987) advocate a different approach which is sequential and developmental, beginning with an interview with the student and parent, and moving towards more comprehensive assessment only as existing information dictates. The philosophy of this approach to vocational assessment is based on economy of resources: if enough information to plan a student's vocational program is garnered through informal procedures, then it is unnecessary to pursue further formal testing which can be time consuming, costly and many times invalid for use with youth with disabilities.

*** Excerpt from and adaptations of "Informal Vocational Assessment: A Workable Option" developed by Karen Kemp, Utah Learning Resource Center; Candy Barela, Jordan, Utah School District; Sandi Hemmert, Utah Mentor Teacher Academy; Jeff Rydalch, Granite, Utah School District. (1987)*

Work experience has been a major thrust in secondary education for students with cognitive disabilities. Now, all students with disabilities should be receiving secondary vocational education which includes work experience. However, oftentimes, students are placed on job sites with little or no assessment of their interest and aptitudes. Those who are tested generally receive a formalized test or battery of tests that provide little or no information concerning actual student performance on the job.

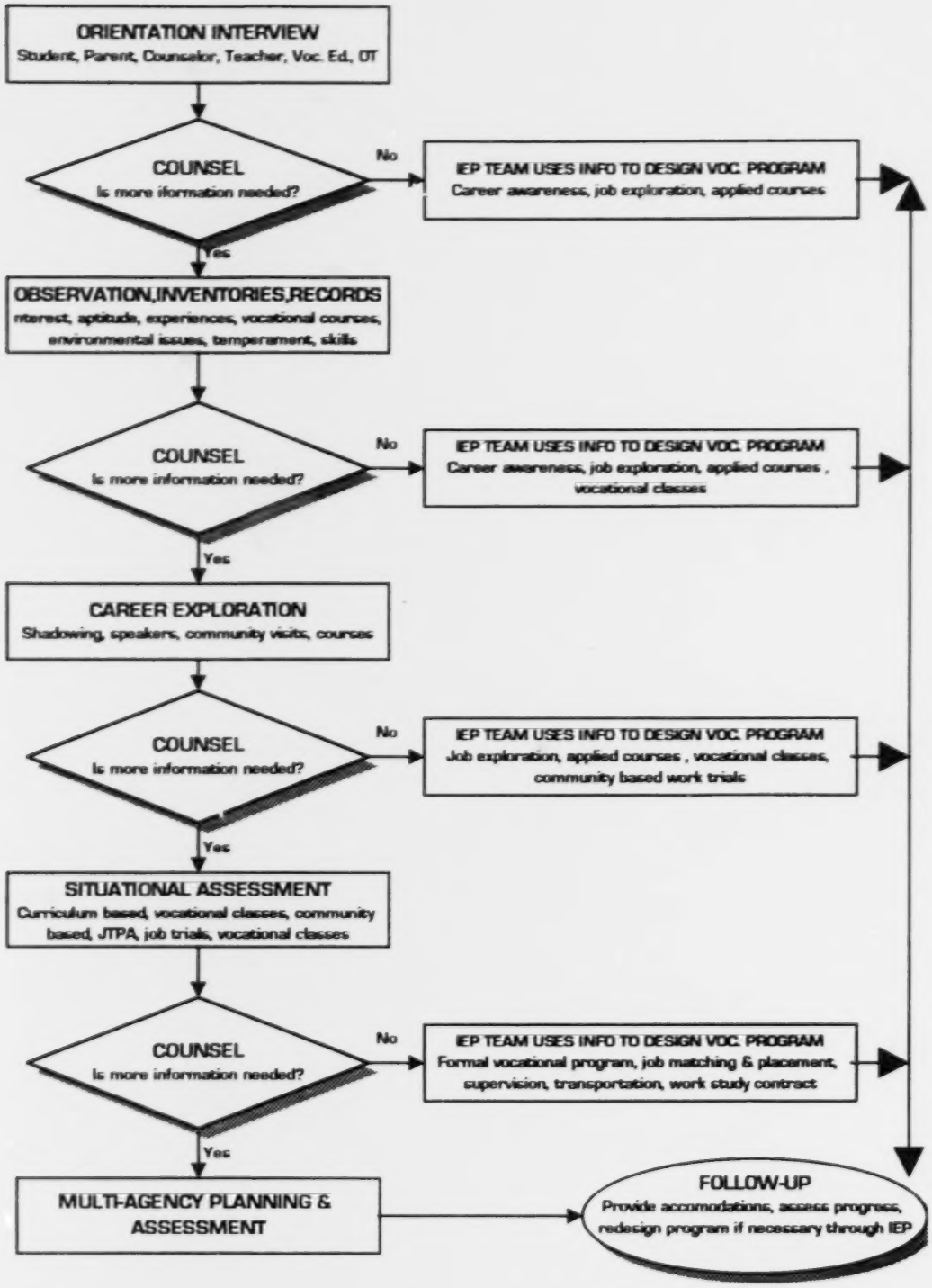
A sequential procedure is crucial to assist educators in providing appropriate functional vocational assessment as required by law, as well as to appropriately educate students in vocational skills that they will need to prosper in adulthood. The following model of functional assessment procedures requires the expertise of all the individuals who know the students well. Parents, regular education teacher, special education teacher, previous employers, guidance counselor, social worker, etc. are a crucial source of information concerning a student's experiences, interests and abilities. The student is the most critical source of information, often left untapped in the assessment process. (Cobb & Larkin, 1985)

The following model describes a functional vocational assessment sequential process. It identifies a five step progression of assessment which can be used with middle and secondary level students with disabilities:

1. Orientation/Interview;
2. Observation, Inventories, Record Reviews;
3. Career Exploration;
4. Situational Assessment;
5. Multi-Agency planning and assessment.

At each stage of the process, a counseling session is held with the student to determine if enough information has been provided to design an appropriate career education and vocational program. If not, the process proceeds to the next, more involved stage in the information gathering activities. This process is illustrated in the following flowchart. The sample forms included in this guide are intended as examples and suggestions. There are a variety of these materials/forms available which are all very appropriate.

FUNCTIONAL VOCATIONAL ASSESSMENT SEQUENCE


ORIENTATION INTERVIEW
Student, Parent, Counselor, Teacher, Voc. Ed., OT
COUNSEL
Is more information needed?
No
IEP TEAM USES INFO TO DESIGN VOC. PROGRAM
Career awareness, job exploration, applied courses
Yes
OBSERVATION,INVENTORIES,RECORDS
interest, aptitude, experiences, vocational courses, environmental issues, temperament, skills
COUNSEL
Is more information needed?
No
IEP TEAM USES INFO TO DESIGN VOC. PROGRAM
Career awareness, job exploration, applied courses , vocational classes
Yes
CAREER EXPLORATION
Shadowing, speakers, community visits, courses
COUNSEL
Is more information needed?
No
IEP TEAM USES INFO TO DESIGN VOC. PROGRAM
Job exploration, applied courses , vocational classes, community based work trials
Yes
SITUATIONAL ASSESSMENT
Curriculum based, vocational classes, community based, JTPA, job trials, vocational classes
COUNSEL
Is more information needed?
No
IEP TEAM USES INFO TO DESIGN VOC. PROGRAM
Formal vocational program, job matching & placement, supervision, transportation, work study contract
Yes
MULTI-AGENCY PLANNING & ASSESSMENT
FOLLOW-UP
Provide accomodations, assess progress, redesign program if necessary through IEP

Lombard (1993) describes a similar model of functional vocational assessment which he entitles "Tech Prep Assessment Model." It includes all of the steps of the previous assessment model, but expands the concept of assessment to include instruction, generalization skill training and maintenance of skills based on ongoing assessments.

TECH PREP ASSESSMENT MODEL - MAGIC

M Make a Prediction for Student's Future

Gather informal student data	Gather formal student data	Map vocational congruence
• Needs • Preferences • Interests	• Occupational interest • Vocational aptitude • Academic skills • Learning style	

A Assess Entry Level Skills

Implement CBVA	Conduct "vocational" program inventory	Determine outcomes
	• Entry level skills • Applied academics • Vocational competencies	

G Guide Skill Acquisition to Skill Mastery

Coordinate discrepancy	Identify goals and objectives	Instructional support
	• Prioritize needs	• Direct • Indirect

I Instruct for Generalization

Skill rehearsal	Orientation to applied setting	Activate skills in multiple settings

C Conduct Maintenance Checks

On-going assessment	Modifications	Evaluations
• Monitor student performance	• Curricular • Instructional	• Student • Program

ORIENTATION/INTERVIEW

STAGE I

ORIENTATION/INTERVIEW

Once the IEP committee decides that a student needs to be involved in a functional vocational assessment process in order to determine his/her vocational strengths and limitations, the first activity to take place should be an Orientation Meeting. At this time the student and his/her parents would meet with the evaluators (usually the special education teacher). The vocational assessment procedures would be explained to them, and the purpose for conducting such an evaluation discussed. This is an important first step in the assessment process, as a positive rapport and relationship can begin to develop among the student, parents and evaluators.

Gathering informal student data

When conducting a functional vocational assessment, it is of primary importance to go to the source, namely the student. Interviews with the person being evaluated are a sometimes neglected feature of evaluation. An interview is an important first step and should be the first component of the assessment process (Brolin, 1982). The student (as well as his/her parents, teachers, etc.) has some idea regarding his/her skills and abilities, interests and desires. During the interview, the teacher (or counselor...) must establish an accepting and meaningful relationship with the student to gain a better understanding and be able to make comparisons with the background information received in the assessment process.

According to Nadolsky (1971),

> In addition to communicating the purpose and goals of the evaluation to the person, the evaluation interview is used to enhance the...evaluator's understanding of the client through the verification and clarification of biographical data, or the acquisition of supplementary information. It is through the evaluation interview that biographical data become alive and meaningful. As a result of a more thorough understanding of the client's past history, present situation, and future aspirations, it is possible to eliminate additional occupations from consideration.

The evaluator must respect the student's choices and preferences since the program developed by the IEP committee is based on them. The student needs to feel s/he has a voice in the evaluation process and isn't just an object being tested and passed on to a training program. As the student gains experience, his/her stated interests, abilities and needs must be explored again and s/he must be included in the planning of his/her own program. Persons with disabilities, especially, often have a limited range of experiences so they must be given time to learn about the various possibilities and communicate them accurately to the evaluator (Brolin, 1982).

This step in the evaluation process should also include interviews with the student's

family, teachers, counselor, etc. They can provide information about the student's home environment, level of support, skills and abilities, adaptations, etc. These people may be able to provide information that the student does not or cannot provide, which may be of importance in vocational planning.

During the interview, the evaluator should gather information including the following: (Peterson, 1985).

1) **Identification Information**

2) **Personal Living and Social Situation**
   a family at home
   b. extended family in community
   c family support regarding work
   d. location and description of residence/living environment
   e. services and employment near home
   f. friends, social groups, supportive relationships
   g. transportation availability
   h. significant personal/family history

3) **Interests**
   a. stated occupational interests of student in interview
   b. stated and observed interest and motivation for work
   c. career decision-making abilities

4) **Functional Academics**
   a. use of reading, writing and math skills in functional situations such as reading and using manuals, filling out forms, keeping records, banking, ATMs, etc.
   b. school grades in various subjects

5) **Physical Skills and Limitations**
   a. includes wide range of physical skills including: sight, hearing, strength, endurance, fine and gross motor dexterity, special physical limitations (allergies..), bending, walking, jumping, climbing, general physical health and problems, etc..

6) **Personal-Social and Independent Living Skills**
   a. lifestyle interests and values
   b. self-concept
   c. personal and self-care skills
   d. mobility skills
   e. community functioning skills
   f. home functioning skills

7) **Special Needs** - defined as those strategies needed to assist the student to successfully adjust to and participate in an environment. These will include:

   a. specification of the degree of participation and the degree of assistance needed
   b. environmental adaptations and support services needed
   c. special instruction or behavior change techniques needed

   Special clues to needed environmental flexibility and adaptations include :

   a. habits, idiosyncrasies, routines
   b. physical/health restrictions
   c. challenging behaviors

From the interview and synthesis of the interview data, the evaluator should be able to generate some preliminary hypotheses about the student's vocational potential, training needs and work interests (Brolin, 1982). However, Lombard promotes also gathering formal data regarding vocational aptitude, academic skills and learning style which can "provide a snapshot of a student's interests in relationship to his/her academic and vocational ability. Mapping the relationship or congruence between interest and ability will enable the student to identify 'vocational' options that are consistent with her/his current interests and ability levels." (Lombard, 1993) At this point, enough information may be available to develop a program appropriate for the student. It may be possible to place the student directly into a career exploration program, vocational education program, work experience program, or on a job training program. This program development must include the student and those involved in his/her program (parent, teacher, counselor, etc.) and be part of the IEP process. However, should more information be required to determine programming needs, the next step on the flowchart should be implemented, namely, "Observation, Inventories, and Record Review" or as described by Lombard, "assess entry level skills."

The following forms may assist in the interview process with the student, family and staff.

Transition Planning Folder

Why do I need this folder? This folder can be used to collect and save information that will be helpful for you and for people who work with you on preparing for your transition out of high school to adult life.

How should I use this folder? Be sure to keep this folder in a place where you can keep using it the whole time you are in high school. Then, when you finish high school, keep it in a safe place at home and use it when you need it. Use a pencil so you can erase and update information that changes. Keep the information up-to-date. Don't wait until the last minute to fill it out. You may miss something important. Bring the folder to your IEP/transition meetings and share it with your planning team.

What should I keep in this folder? Use this folder as a "working file" to hold information and planning materials for this year. This folder does not replace your main school file. All of your assessments and legal forms should be kept in your main school file in the office. Make copies of things from your main file that you also want to keep in this file.

_____
Student Name

Production of this folder is funded by the Minnesota Department of Education and the Minnesota Department of Jobs and Training through a cooperative agreement with the U.S. Office of Special Education and Rehabilitative Services (OSERS) #H158A10040, "Statewide Strategies for Improving the Delivery of Transition Services for Youth with Disabilities and Families in Minnesota."

Transition Planning Folder

(Fill out with pencil)

Date I last updated this folder: _____

Name: _____ Birthdate: _____

Address: _____

Phone: _____ Social Security #: _____

Guardian(s): _____

High School: _____ School District: _____

Graduation Date: _____ County: _____

Advisor/IEP Manager: _____

School Counselor: _____

Other people who can help plan my transition

(for example: Division of Rehabilitation Services (DRS) counselor, County Case Manager, Support Service person from a college)

Name *i.e. John Stone*	**Agency** *DRS*	**Phone** *122-3456*	**Current Status** *referral completed*

Benefits I receive (check all that apply)

_____ Medical Assistance
_____ SSI (Supplemental Security Income)
_____ Medicaid
_____ PEL Grant
_____ AFDC (Aid to families with dependent children)
_____ General Assistance
_____ Other _____

Future Adult Goals for Home Living

The number in each box below tells my interest and the amount of support I might need.
1 = none 2 = minimum 3 = moderate 4 = maximum

	Interest	Support
Live alone and independently		
Live with friends or roommates		
Live with parents or foster parents		
Live with other relatives		
Live with husband or wife		
Live in supervised setting		

Description of my disability(s) _____

_____

Therapy I have received _____

_____

Concerns I have about my health _____

_____

_____

Medications I use

name of medication how often I use it what I use it for

_____

_____

_____

Other transition related tests and inventories I have taken

date name of test What I learned about myself

_____

_____

_____

Things I am good at

_____

_____

_____

Things I like to do in my spare time

_____

_____

_____

Transportation - how I get around _____

Location of my social security card _____

Registration # for selective service (males only) _____

Future Adult Goals for Recreation and Leisure

The number in each box below tells my interest and the amount of support I might need.
1 = none 2 = minimum 3 = moderate 4 = maximum

Area	Specific goal	Interest	Support
Hobbies			
Participatory Sports			
Spectator Sports			
Social Activities			
Cultural Activities			
Rest and Relaxation			
Vacations and Travel			
Physical Fitness			
Other _____			
Other _____			
Other _____			

Activities I would like to try _____

_____

_____

Future Goals for Community Participation

The number in each box below tells my interest and the amount of support I might need.
1 = none 2 = minimum 3 = moderate 4 = maximum

Area	Specific goal	Interest	Support
Shopping			
Transportation			
Health Care			
Banking			
Civic Activities			
Agency Support			
Clubs and Organizations			
Other _____			
Other _____			

Activities I would like to try _____

_____

_____

Future Adult Goals for Jobs and Job Training

The number in each box below tells my interest and the amount of support I might need.
1 = none 2 = minimum 3 = moderate 4 = maximum

	Interest	Support		Interest	Support
Part time employment			Large business setting		
Full time employment			Small business setting		
Indoor work			Near home		
Outdoor work			Within commuting range		
Sit down work			Work with people		
Active and physical work			Work alone		

Some jobs I might be interested in

Name of Job(s)	*Training I might need*

Work/Volunteer Experience I have had

Type of Job	*Employer*	*Paid or volunteer*	*Dates*

Vocational Tests and Inventories

Date	*Name of test*	*What I learned about myself*

Who I can get letters of recommendation from

Name	*Position*	*Phone*

Other important information

Future Adult Goals in Postsecondary Education and Training

The number in each box below tells my interest and the amount of support I might need.
1 = none 2 = minimum 3 = moderate 4 = maximum

	Interest	Support		Interest	Support
2-year Community College			4-year College or University		
Community Education			Trade or Business School		
Technical College			Other		

Program of study I am interested in _____

Schools I have visited

Date Name of School What I learned

_____

_____

_____

Schools I have applyed to attend

Date Name of School Status of application

_____

_____

_____

Entrance exams I have taken

Date Name of test Score/Rank

_____

_____

_____

Financial aid I have applied for

Date Name of aid Status of application

_____

_____

_____

I communicate best by

____ talking ____ writing ____ signing other_____

I learn best by

____ modeling ____ repeating ____ reading

____ hands-on ____ listening ____ other_____

Accommodations and assistive technology that I use

_____

_____

_____

Last Name _____ First Name _____ MI _____ Advisor's Name _____

My High School Coursework and Activities

Courses I have completed at each grade level (√ when passed)

9th grade	√	10th grade	√	11th grade	√	12th grade	√	12+	√

Total credits

_____ _____ _____ _____ _____

Credits left

_____ _____ _____ _____ _____

My best subjects in school have been

_____

_____

_____

Extra-curricular activities (in and out of school)

_____

_____

_____

_____

_____

Log of my IEP/transition planning meetings

Date	*√ if I attended*	*Date*	*√ if I attended*

NOTES (write down things you want to remember)

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

Date _____ RE: _____

STEP--University of Idaho

STUDENT INTERVIEW

To be completed by student:

Name: _____ Date: _____

Address: _____

City, State, Zip: _____

****

What year are you planning to graduate? _____

Do you receive any special services at school? _____ Yes _____ No

If yes, what kind? _____

_____

****

Previous Work Experience

1. What jobs have you done around your house or school?

_____

_____

_____

2. Have you ever had a job working for an employer? ____ Yes ____ No

Name of Employer	Type of Work	When
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Have you ever filled out a job application? ____ Yes _____ No

4. Have you ever been interviewed for a job? _____ Yes _____ No

STEP--University of Idaho

Career Interests

1. What kind of job would you like to do when you graduate from high school or college?

_____

_____

_____

2. What kinds of jobs are you interested in now? _____

_____

_____

3. Which of these jobs is the one you would most like to do?

First Choice: _____

Second Choice: _____

Third Choice: _____

4. What jobs would you like to find out more about? _____

_____

_____

_____

5. What kind of work would you not like to do? _____

_____

_____

****

Skills

1. What would an employer like about you? _____

_____

_____

2. What would an employer not like about you? _____

_____

_____

STEP--University of Idaho

3. Do you have any skills you learned in school or elsewhere that would help you on a job? _____

_____

_____

_____

****

Notes

****

Interviewed By: _____ Date _____

STEP--University of Idaho

PARENT INTERVIEW

General Student Information

Student's Name _____
First Middle Last

Birthdate _____ Age _____

Current Address _____ Phone _____

Parent/Caregiver _____ Phone _____

Parent/Caregiver Address _____
(If different from student's)

1. What kind of high school program would you like for your son or daughter (check all which apply)?

_____ Classes preparing for college
_____ Classes which teach basic reading, writing, and math
_____ Classes which teach skills needed for independent living, such as cooking, budgeting, shopping, hygiene
_____ Vocational classes such as business, mechanics, carpentry
_____ Work/study or on-the-job training

2. What do you consider the most important skills for your son/daughter to learn in school (for example, math, reading, writing, spelling, job-seeking skills, job-keeping skills)?

3. When do you think your son/daughter will graduate? _____

4. In what kind of program would you like your son/daughter enrolled after finishing high school?

_____ College
_____ Military
_____ None
_____ Junior College
_____ Industrial/trade school
_____ Don't know

5. What do you see your son/daughter doing after leaving high school?

a. employment:

b. living arrangements:

c. leisure activities:

STEP--University of Idaho

Page Two

6. What types of work do you think your son/daughter would like best? Why?

7. What types of work do you think your son/daughter might not like? Why?

8. What type of summer job do you think your son/daughter could perform this summer or next? Would he/she need training to do this?

9. What work behaviors/attitudes does your son/daughter have that an employer might like?

10. What specific job-finding or job-keeping skills would you especially like your son/daughter to learn?

Parent Questionnaire

From Wausau Public Schools

The following questions will help you think about the services your son or daughter will need after leaving the public schools. Your answers to these questions will help school and other agency staff determine how to assist you in planning and locating services for your son or daughter.

1. Please give the age, grade level, and date of your son or daughter.

Age	Grade	Graduation Date *if known*

2. What are your current post school plans for your son or daughter? Please check the appropriate spaces:

- ☐ live at home
- ☐ apartment with support
- ☐ other *specify* _____
- ☐ group home
- ☐ independent

3a. Have you contacted any of the following agencies regarding postschool placements or services? Please check.

- ☐ Community Colleges
- ☐ Vocational Technical Institute (VTI)
- ☐ Private Employment Agencies
- ☐ Job Service
- ☐ Your Child's Teacher and Guidance Counselor
- ☐ County Developmental Disabilities Office
- ☐ Division of Vocational Rehabilitation (DVR)
- ☐ Social Security Administration (SSA)
- ☐ Other *specify* _____

3b. Have you been contacted by any of the agencies mentioned above regarding postschool services? ☐ yes ☐ no

If yes, who contacted you?	When?	Which agency?

3c. Have you been informed of any postschool placement options for your child? ☐ yes ☐ no

If yes, who contacted you?	When?	Which agency?

4. Have you encountered any of the following problems in obtaining postschool services for your son or daughter? Please check any that apply.

- ☐ Vocational training unavailable
- ☐ Vocational training inappropriate
- ☐ Other training unavailable or inappropriate
- ☐ Residential placements unavailable in your area
- ☐ Residential placements inappropriate in your area
- ☐ Transportation problems *specify type of problem* _____
- ☐ Getting the "run-around" from service providers
- ☐ Lack of knowledge of available services/resources
- ☐ Don't know where to start
- ☐ Other *Specify* _____

5. In what areas do you feel that you or your son or daughter will need assistance for postschool planning? Please check all that apply

Vocational—
- ☐ Work Placement
- ☐ Work Training
- ☐ Apprenticeships
- ☐ Transportation

Residential—
- ☐ Placement
- ☐ Independent Living
- ☐ Emotional Support
- ☐ Financial Support

Education—
- ☐ College
- ☐ Vocational, Technical, and Adult Education
- ☐ Proprietary School

Leisure/Recreation—
- ☐ Locating appropriate programs
- ☐ Transportation
- ☐ Emotional Support
- ☐ Access

Social/Legal—
- ☐ Guardianship
- ☐ Sexual Awareness
- ☐ Taking Care of Self
- ☐ Verbal or physical abuse

Other *Specify*

6. What could the school district staff do to assist you in planning for your son or daughter's post school needs?

Home Responsibilities Questionnaire

When your son or daughter is expected to carry out home chores or to care for him/herself in a specific way:

1. What personal qualities or characteristics assist him/her in accomplishing such needed tasks?

   What personal characteristics get in the way of accomplishing the tasks?

2. Does your child have certain preferences about the kinds of help around the house he/she gives? Name the preferences.

3. What home chores or personal care activities seem to be easily managed by our son or daughter?

4. Name your child's behaviors or attitudes that assist him or her in accomplishing home responsibilities.

   Name one behavior you wish your son or daughter might learn in order to function better as he/she performs work at home.

Parent Transition Questionnaire
A Guide for Transitional Planning

Student's Name	Parent/Guardian's Name

1. Have educational or other personnel talked with you about the postschool future of your son/daughter? ☐ yes ☐ no
   Describe _____

2. (a) What do you want for your son/daughter during the next year, in five years, 10 years?

   (b) What are the needs you would like to see addressed in each of these areas if any, during the next five to ten years? What is your son/daughter currently doing in each area?

   (1) Recreation and Leisure (Acquisition of preferred activities such as hobbies, sports, clubs, etc.):

Currently	Needs

   (2) Jobs and Job Training (Acquisition of skills necessary to obtain and keep employment, fill out applications, interviews, resumes, employer/employee relations):

Currently	Needs

   (3) Post-secondary Training (Education and/or training after high school; preparation for and application to technical colleges, community colleges, universities, adult education, community education):

Currently	Needs

   (4) Community participation (Skills needed to access community resources including people, public places, and activities such as support groups, churches, medical services, legal services, public transportation, drivers license, government agencies):

Currently	Needs

3. What most concerns you about the future of your son or daughter?

4. Are you presently in contact with any agencies that will or may be involved with your son/daughter after graduation? List.

From the Minnesota Department of Education

Parent Survey

Name _____

What grade is your child in? _____

1. What experiences do you feel influenced your son or daughter in his or her schedule planning decisions? *(Please check all appropriate responses.)*
   - ❑ Vocational evaluation (evaluation lab)
   - ❑ Career exploration
   - ❑ Toured or discussed vocational classes
   - ❑ Do not know

2. Who do you think influenced his or her decision most? *(Please check only one)*
   - ❑ Parents/family
   - ❑ Friends
   - ❑ Teacher
   - ❑ Counselor
   - ❑ Principals
   - ❑ No one (their own decision)
   - ❑ Other individuals, *please specify* _____

3. Some elements of vocational education are considered **relatively** more important than others. Please rank the following elements of vocational education. One is the most important. Five is the least important. Each element must have a different rank.
   - ❑ Academic skills (reading, writing, and math)
   - ❑ Work experience (actually having a job)
   - ❑ Communication skills (ability to express yourself to others)
   - ❑ Work attitude and human relations skills (getting along with others, dependability, etc.)
   - ❑ Vocational and technical knowledge and skills (mastery of technical skills)

4. What is your child's future plan?
   - ❑ College
   - ❑ Junior college
   - ❑ Military service
   - ❑ Technical school
   - ❑ Immediate full-time employment
   - ❑ Part-time employment and school
   - ❑ Don't know
   - ❑ Other, *please specify*_____

5. What skills/services could have helped your child in getting a job?
   - ❑ Good technical background
   - ❑ Previous work experience
   - ❑ Good job-hunting skills
   - ❑ Knowing the right people
   - ❑ Help by a job placement counselor
   - ❑ Does not apply
   - ❑ Other, *please specify*_____

6. What skills/services **did help** your child in getting a job?
   - ❑ Good technical background
   - ❑ Previous work experience
   - ❑ Good job-hunting skills
   - ❑ Knowing the right people
   - ❑ Help by a job placement counselor
   - ❑ Does not apply
   - ❑ Other, *please specify*_____

7. How will your son or daughter get his or her first job?
   - ❑ Job placement services
   - ❑ Family/relatives
   - ❑ Friends
   - ❑ Training supervisor
   - ❑ Vocational instructor
   - ❑ On his/her own
   - ❑ Does not apply
   - ❑ Don't know

8. How did your son or daughter get his or her first job?
   - ❑ Job placement services
   - ❑ Family/relatives
   - ❑ Friends
   - ❑ Training supervisor
   - ❑ Vocational instructor
   - ❑ On his/her own
   - ❑ Does not apply
   - ❑ Don't know

9. Did you talk with anyone at school about your child's options?
   - ❑ Yes ❑ No

10. Who did you discuss the options with? (*Please check all appropriate responses*)
    - ❑ Special education teacher
    - ❑ Classroom teacher
    - ❑ Vocational evaluator
    - ❑ DVI instructor
    - ❑ Counselor
    - ❑ Principal
    - ❑ Vocational Teacher
    - ❑ Other, *please specify*_____

11. Have you attended your child's IEP meetings?
    - ❑ Yes ❑ No

12. Did you participate in planning or writing the IEP?
    - ❑ Yes ❑ No

13. If yes, how did you participate? (*Please check all appropriate responses.*)
    - ❑ Attended (no. of times _____, no. of years _____)
    - ❑ Signed IEP
    - ❑ Offered suggestions
    - ❑ Asked questions
    - ❑ Asked for evaluation
    - ❑ Other, *please specify*_____

14. What could be done to help students with disabilities get jobs?

15. Are you aware of funds, services, and programs available to help students with disabilities make the transition from school to work?

❑ Yes ❑ No

16. Which of the following services are you aware of? (*Please check all appropriate responses.*)

Jobs

❑ Division of Vocational Rehabilitation
❑ Job Training Partnership Act (JTPA) funded programs
❑ Job Service
❑ Private employment agency
❑ Other, *please specify* _____

General Assistance

❑ Group Homes
❑ Social Security
❑ Mental Health
❑ Developmental Disabilities
❑ Other, *please specify* _____

17. What services do you feel public schools should provide for students with disabilities in their transition from school to work? (Please be as specific as possible.)

18. What services does the community need in order to assist students with disabilities in transition from school to work? (*Please list.*)

19. If you feel that your concerns about transition have not been addressed in any of the questions, please list these concerns.

Return completed form by _____ in the enveloped provided.

OBSERVATION, INVENTORIES & RECORD REVIEWS

STAGE II

OBSERVATION, INVENTORIES & RECORD REVIEWS

At the completion of the Orientation/Interview stage of vocational assessment, it is often determined that more information is needed in order to make decisions regarding a student's programming needs. The next stage in the Functional Vocational Assessment model is "Observation, Inventories and Record Reviews." During this stage, more information is gathered through an analysis of existing reports and records of the student's achievements, observations of the student, and the administration of various inventories to determine the student's interests, abilities, work temperament, etc. Based on the results of the interview and record review, decisions can be made regarding what types of inventories would be necessary and what information would be better obtained through observations.

Among the types of informal tests which could be administered are the following:

1. **Checklists**
   Checklists are sampling procedures for assessing a series of behaviors appropriate to program development or evaluation. The checklist can be used to elicit the student's, teacher's, or parent's perceptions of the student's school or work-related performance. It can be used to identify desired work behaviors by a prospective employer. Although the checklist can be expected to provide some subjective data, it does allow the teacher and student to compare the student's perception of his/her performance against others in critical decision-making situations.

2. **Observations/ Task Analysis**
   Observational techniques can be effective measures of the strength of a behavior. Observations can be made by the teacher, parent, employer, or a teacher's aide. The observer identifies a specific behavior or a series of behaviors that may contribute to, or interfere with, the learning process and/or job performance. For example, a teacher may observe a student's on-task behavior in his math class. The teacher can determine the duration of time the student attends to the task before being distracted, duration of time spent on the distraction, and types of distractions negatively affecting on-task behavior. Once this information is identified, the teacher can design instructional strategies or provide activities to increase on-task behavior and reduce off-task behavior.

3. **Curricular-Based Information**
   These testing procedures (competency based vocational assessment) measure a student's performance level with essential entry level academic and vocational skills required in the program. The process includes a series of questions or activities that the student must answer or perform. Based on the test results, the evaluator can determine the student's readiness for the material and the

instructional proficiency level. The information provides the evaluator and student with objective information about the student's achievement level relative to specific objectives, and enables both to make decisions regarding the appropriate instructional-experiential program.

Among the areas that need to be looked at during the Observation, Inventories and Record Review stage of vocational assessment are the following:

1. **Specific Vocational Skills** - this includes specific work tasks in school and at home in which the student has skills, such as:
   a. tool and equipment use
   b. informal chores at home
   c. informal chores and work done for others
   d. part and full-time work experience

2. **Work-Related Behaviors** - observed at home or in school:
   a. punctuality
   b. attendance
   c. attention to tasks
   d. quality of work
   e. speed of work
   f. continuity of work
   g. interaction with peers and teachers
   h. asking for help and directions

Information on work-related behaviors can be gathered at home or in school .

3. **Learning Skills and Styles**
   a abilities to learn academic, functional work tasks
   b functional community living skills
   c. instructional and behavior change techniques that are most effective
   d. learning rate
   e. preferred learning strategies
   f. etc.

   Information on learning skills and styles can be obtained through:
   a. self-report learning style inventories
   b. observations of parents, teachers, etc.
   c. observations of learning in performance assessments - work samples, vocational classroom tryouts, job tryouts, etc.
   d. performance-based learning assessment - e.g., training on a particular skill and keeping systematic data on learning that occurs in school or at home
   e. task analysis

4. **Interests** - this would look at the student's interests in a more in-depth manner than in the interview process:
   a. observed interests regarding work and social situations: in school subjects, by teachers and counselors, and by parents at home
   b. tested interests via vocational interest and awareness inventories
   c. occupational awareness: via interviews, awareness tests, interviews with parents

5. **Academic Aptitudes**
   a. systematic observation of the application of academic skills in functional situations
   b. functional tests of academic skills
   c. general academic achievement test scores

6. **Work Temperament** - this looks at such characteristics as:
   a. indoor vs outdoor work
   b. working independently vs in a group situation
   c manual labor vs seatwork
   d. repetitive tasks vs a variety of activities
   e. working with the public vs behind the scenes
   f. etc.

Upon completion of the activities in the Observation, Inventories and Record Review stage of vocational assessment, a clearer picture of the student should begin to emerge. Knowing his/her abilities, interests, experiences, etc. should enable the teacher, parent and student to make some informed decisions regarding possible vocational training and/or work experiences. However, should a more in-depth evaluation need to take place in order to make valid decisions regarding the appropriate training and/or work-study program for the student, the next stage of the flowchart should then be utilized, i.e. "Career Exploration." Theoretically, career exploration should have occurred for all students in Wisconsin during their middle school years since this is a requirement of Wisconsin's developmental guidance model. However, many students with disabilities have not been availed of career exploration activities in middle school and consequently high schools will have to provide these opportunities.

Sample transition skills checklists that include employment and independent living are on the following pages.

STUDENT VOCATIONAL EVALUATION FORM

Student's Name:	Birthdate:
School:	Graduation Date:
Parents/Guardian:	Program:
Parents' Address:	Handicap(s):
Teacher Reporting:	Date of Eval:

ACADEMICS

Functional Reading Skills	
Functional Math Skills	
Functional Expressive Language	
Functional Language Comprehension	
Functional Writing Skills	

Implications for vocational exploration:

Implications for vocational instruction:

Implications for work experiences:

EXCEPTIONAL EDUCATIONAL NEEDS

EENs	
Related Services	
Assistive Devices	

STUDENT'S PREFERENCES/INTERESTS

VOCATIONAL CLASSES COMPLETED

Vocational Classes	Competencies Mastered

VOCATIONAL EXPERIENCES

Site	
Purpose (Explore, Assess, Train, Work/Study)	
Activities	
Skills Mastered	
Hrs/Wk, Dates	
Site	
Purpose (Explore,Assess, Train, Work/Study)	
Activities	
Skills Mastered	
Hrs/Wk, Dates	

PRIORITIZED DESIRABLE WORKER CHARACTERISTICS [1]

Worker Characteristics	Demonstrates	Instructional Methods/ Adaptations Needed to Improve
1. Good attendance		
2. Punctuality		
3. Acceptance of supervision		
4. Ability to accept criticism & implement suggestions		
5. Ability to follow/retain verbal directions		
6. Ability to read/carry out simple written directions		
7. Cleans up after self		
8. Ability to attend to task until completed		
9. Ability to work independently once task is learned		
10. Awareness of safety precautions		
11. Respect & ability to care for equipment		
12. Ability to adapt to new people/situations		
13. Ability to cooperate/get along		
14. Ability to measure		
15. Appropriate self-control/frustration management		
16. Ability to ask for assistance		
17. Ability to perform job adequately		
18. Confidence in performing task/job		
19. Ability to maintain quality of work/correct own errors		
20. Ability to maintain adequate productivity/pace		
21. Has realistic job goals		
22. Has knowledge/acceptance of rules		
23. Flexibility for different types of jobs		
24. Willingness to work		
25. Has image of self as a worker, orientation toward work, interest in job		
26. Endurance/stamina		
27. Ability to communicate basic needs		
28. Initiative		
29. Acceptance of responsibility		

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Worker Characteristics	Demon-strates	Instructional Methods/ Adaptations Needed to Improve
30. Exhibits good grooming/appropriate personal hygiene		
31. Dresses appropriately		
32. Demonstrates helping behaviors/teamwork		
33. Takes pride in work		
34. Ability to exercise good judgement/problem solving skills		
35. Willingness to learn		

[1] ADAPTED FROM "A COMPARISON BETWEEN THE PERCEPTIONS OF SPECIAL EDUCATORS AND EMPLOYERS: WHAT FACTORS ARE CRITICAL FOR JOB SUCCESS?", LINDA MCCREA, *CAREER DEVELOPMENT FOR EXCEPTIONAL INDIVIDUALS*, 14:2, 121-130, 1991.

TRANSITION PLANNING ASSESSMENT

Elementary School

	YES	NO	Current Year	Future	Until
POSTSECONDARY EDUCATION (Late Elementary)					
Does the student express interest in postsecondary education?					
Does the student understand the need for postsecondary education for some jobs?					
Does the student understand the emphasis of academic skills for postsecondary education success?					
EMPLOYMENT/CAREER AWARENESS					
Can the student explain parent(s) jobs?					
Can the student name 10 types of jobs?					
Can the student explain her/his academic strengths and weaknesses?					
Can the student explain how his/her skills could relate to a job?					
Can the student express interest in 2-3 different jobs?					
ADULT SERVICES					
Is the student in need of services from a social service agency such as the Div.of Developmental Disabilities?					
INDEPENDENT LIVING					
<u>Financial Assistance & Income Support</u>					
Is the student receiving Social Security Income?					
Does the student earn an allowance?					
Does the student spend allowance wisely?					
<u>Living Arrangements</u>					
Can the student discuss various types of living arrangements (homes, apartments, etc.)?					
<u>Medical Services & Resources</u>					
Can the student describe his/her medical needs?					
Can the student take medicine (if needed) independently?					
Can the student state her/his doctor's name?					
Will there be a need for ongoing medical care?					
<u>Insurance</u>					
Do the parents/guardians have medical insurance on the student?					
Do the parents/guardians understand insurance options for the student (i.e. Medicaid, etc.)?					
<u>Personal Management</u>					
Does the student choose her/his clothes and dress herself/himself?					
Does the student perform personal hygiene tasks independently (bathing, etc.)?					
Does the student follow safety rules?					

Developed by the Arizona Department of Education

TRANSITION PLANNING ASSESSMENT
Elementary School (Continued)

	Yes	No	Current Year	Future	Omit
Does the student have home chores designated?					
Does the student manage his/her time effectively?					
Socialization/Friends					
Does the student have age-appropriate friends?					
Does the student have friends who do not have a disability?					
Does the student have opportunities to develop friendships?					
Does the student demonstrate being a friend (sharing, etc.)?					
Does the student participate in activities with friends?					
Transportation					
Can the student negotiate her/his neighborhood?					
Can the student state various means of transportation (i.e. walk, bike, bus, car, train, etc.)?					
Can the student negotiate her/his way around the school *independently*?					
Advocacy & Legal Services					
Will the student be in need of advocacy or legal services in the future (guardianship, etc.)?					
Do the parents/guardians communicate their needs/desires and their hopes for the student?					
Self-Advocacy					
Does the student communicate her/his needs effectively?					
Does the student ask for help when needed?					
Does the student participate in his/her IEP meeting?					
Does the student use communication devices efficiently (i.e. phone, letters, computers, etc.)?					
Does the student resolve conflicts with other effectively?					
COMMUNITY PARTICIPATION					
Does the student go to restaurants, movies, library?					
Does the student participate in sports activites?					
Does the student negotiate his/her neighborhood easily?					
Does the student participate in church youth groups?					
Leisure & Recreation					
Does the student participate in school activites?					
Does the student participate in Physical Education classes?					
Does the student play games at home?					
Does the student expreas his/her interest in various recreational activities?					
Does the student participate in different leisure/recreation activities outside of school?					

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TRANSITION PLANNING ASSESSMENT
Elementary School (Continued)

	Yes	No	Current Year	Future	Omit
Does the student have home chores designated?					
Does the student manage his/her time effectively?					
Socialization/Friends					
Does the student have age-appropriate friends?					
Does the student have friends who do not have a disability?					
Does the student have opportunities to develop friendships?					
Does the student demonstrate being a friend (sharing, etc.)?					
Does the student participate in activities with friends?					
Transportation					
Can the student negotiate her/his neighborhood?					
Can the student state various means of transportation (i.e. walk, bike, bus, car, train, etc.)?					
Can the student negotiate her/his way around the school independently?					
Advocacy & Legal Services					
Will the student be in need of advocacy or legal services in the future (guardianship, etc.)?					
Do the parents/guardians communicate their needs/desires and their hopes for the student?					
Self-Advocacy					
Does the student communicate her/his needs effectively?					
Does the student ask for help when needed?					
Does the student participate in his/her IEP meeting?					
Does the student use communication devices efficiently (i.e. phone, letters, computers, etc.)?					
Does the student resolve conflicts with other effectively?					
COMMUNITY PARTICIPATION					
Does the student go to restaurants, movies, library?					
Does the student participate in sports activites?					
Does the student negotiate his/her neighborhood easily?					
Does the student participate in church youth groups?					
Leisure & Recreation					
Does the student participate in school activites?					
Does the student participate in Physical Education classes?					
Does the student play games at home?					
Does the student express his/her interest in various recreational activities?					
Does the student participate in different leisure/recreation activities outside of school?					

TRANSITION PLANNING ASSESSMENT

Middle School/Junior High School (Continued)

	YES	NO	Current Year	Future	Omit
Personal Mangement					
Does the student get himself/herself up in the mornings?					
Does the student independently care for hygiene and grooming?					
Does the student prepare simple meals?					
Does the student do his own laundry?					
Does the student independently complete assigned household chores?					
Does the student follow safety rules?					
Does the student purchase needed personal items?					
Does the student use time effectively?					
Socialization/Friends					
Does the student have age-appropriate friends?					
Does the student have friends who do not have a disability?					
Does the student demonstrate different levels of personal relationships (friends, intimate friends)?					
Does the student participate in activities with her/his friends i.e. (parties, etc)?					
Does the student resolve conflicts with friends effectively?					
Transportation					
Can the student negotiate his/her neighborhood?					
Can the student identify various means of transportation (i.e. walk, bike, bus, car, train, etc.)?					
Can the student negotiate the school environment?					
Can the student utilize at least one mode of transportation?					
Advocacy & Legal Services					
Will the student need ongoing advocacy or legal services?					
Self-Advocacy					
Does the student participate in the IEP planning?					
Does the student demonstrate assertiveness?					
Does the student express desires effectively?					
Does the student have opportunities to make choices and decisions?					
Does the student communicate effectively and differentially with peers and adults?					

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TRANSITION PLANNING ASSESSMENT

Middle School/Junior High School (Continued)

	YES	NO	Current Year	Future	Omit
COMMUNITY PARTICIPATION					
Does the student negotiate his/her neighborhood?					
Does the student demonstrate ability to get to movies, grocery store, restaurant, library, etc.)?					
Does the student participate in community sports activites?					
Does the student participate in youth groups?					
Leisure & Recreation					
Does the student identify leisure interests?					
Does the student participate in these identified areas?					
Does the student know how to find out about leisure activites?					
Does the student participate in school extracurricular activites?					
Does the student demonstrate participation in both individual and group leisure/recreation activities?					

TRANSITION PLANNING ASSESSMENT

High School

	YES	NO	Current Year	Future	Omit
POSTSECONDARY EDUCATION					
Does the student want or need postsecondary training? What type? __ vo-tech __ cc __ 4 year __ ojt					
Does the student need assistance from an adult agency?					
Does the student need assistance with application/financial aid forms?					
Does the student need help selecting an institution?					
Does the student know and meet the deadlines for applications?					
Does the student meet the criteria for admission?					
Can the student contact the support services personnel at the postsecondary institution?					
Can the student effectively express her/his limitations and need for various support services?					
Can the student visit the campus prior to selection?					
EMPLOYMENT/CAREER AWARENESS/VOCATIONAL TRAINING					
Does the student demonstrate an understanding of his/her employment options (full-time, part-time, etc.)?					
Does the student demonstrate the skills, aptitudes and behaviors to reach her/his goal?					
Does the student demonstrate ability to complete W2/W4 and income tax forms?					
Does the student relate skills/abilities to jobs?					
Does the student describe employment options available in the community?					
Does the student have or need related work experience?					
Does the student need help with finding a job?					
Does the student need help with keeping a job?					
Is the student willing to relocate?					
Career Planning					
Does the student have vocational assessment information in her/his file?					
Does the student have a realistic career goal?					
Does the student have a realistic plan to reach the goal?					
Does the student have parental support for the career goal?					
ADULT SERVICES					
Is the student in need of services from the Division of Developmental Disabilities?					
Is the student in need of services from the Division of Vocational Rehabilitation?					
Is the student in need of services from Jobs Training Partnership Act?					
Is the student in need of services from the Social Security Administration?					
Is the student in need of services available from other social service agencies? Specify_____					

TRANSITION PLANNING ASSESSMENT

High School (Continued)

	YES	NO	Current Year	Future	Omit
INDEPENDENT LIVING					
Finalcial Assistance & Income					
Does the student need financial assistance from an adult agency (DVR, SSI, etc.)?					
Does the student receive SSI and understand the various programs available to him/mer?					
Does the student know how to file for various benfits (i.e. unemployment, SSI, public assistance, etc.)?					
Does the student make purchases appropriate for level of income?					
Does the student know how to open and maintain a checking and savings account?					
Does the student need ongoing assistance in this area?					
Personal Management					
Can the student get herself/himself up in the morning?					
Can the student use good judgement about going to bed on time?					
Can the student prepare meals for self?					
Can the student manage money effectively?					
Can the student manage time effectively?					
Can the student perform routine household maintenance chores (dishes, cleaning, etc.)?					
Can the student select and care for clothes?					
Can the student maintain personal grooming and hygiene skills?					
Socialization/Friends					
Does the student have age-appropriate friends?					
Does the student demonstrate different levels of personal relationships (close friends, intimate friends)?					
Does the student have friends who do not have a disability?					
Does the student participate in activities with her/his friends?					
Does the student resolve conflicts with friends effectively?					
Transportation					
Can the student demonstrate the use of various modes of transportation (walking, driving, bicycle, etc.)?					
Does the student know how to find transportation when needed?					
Does the student have a drivers license?					
Does the student need special travel arrangements made on an ongoing basis?					

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TRANSITION PLANNING ASSESSMENT

High School (Continued)

	YES	NO	Current Year	Future	Omit
Advocacy & Legal Services					
Does student demonstrate an understanding of her/his rights and responsibilities as a person with a					
Does the student need ongoing advocacy support?					
Does the student need ongoing guardian support?					
Self-Advocacy					
Does the student demonstrate assertiveness with friends?					
Does the student demonstrate assertiveness with adults?					
Does the student participate in his/her IEP planning?					
Does the student participate in the development of long range goals?					
Does the student express opinions and needs effectively?					
Does the student demonstrate ability to ask for help when needed?					
Does the student understand and effectively express limitations/needs as well as strengths?					
COMMUNITY PARTICIPATION					
Does the student demonstrate how to locate/utilize public utility companies, post office, drivers license?					
Does the student utilize public shopping malls, theaters, library, grocery stores, etc.?					
Does the student know how to register to vote?					
Does the student know how to apply for and gain a drivers license?					
Does the student know how to register for selective service?					
Does the student demonstrate use of public transportation?					
Leisure & Recreation					
Does the student demonstrate participation in school activities?					
Does the student demonstrate participation in community activities?					
Does the student demonstrate participation in both individual and group recreational activities?					
Does the student demonstrate the ability to seek out information on leisure activities of interest to him/her?					

ASSET	ACCEPTABLE	LIMITATION	
			ASSET: Performance or behavior should contribute to success in training and/or job placement. ACCEPTABLE: Performance or behavior appears to be acceptable for most employment or training situations. LIMITATION: Perfomance or behavior appears to be unacceptabl for most employment situations.
+	.	-	SKILL FACTORS CHECKLIST

MANUAL SKILLS

1. Fine Dexterity: Makes fine finger movements smoothly, quickly, accurately. Observed to perform on work samples requiring this trait at a competitive rate.
2. Gross Dexterity: Makes gross hand and arm movements smoothly, quickly, accurately. Observed to perform on work samples requiring this trait at a competitive rate.

DISCRIMINATION

1. Color: Recognizes similarities or differences in color or shades of color.
2. Form: Perceives pertinent detail in objects or pictorial/ graphic material; sees slight differences in shades/shadows of figures.
3. Size: Visually determines differences in the magnitude of objects.
4. Spatial: Conceptualizes forms in space and "visualizes" objects of two or three dimensions.

ORGANIZATION AND PLANNING

Arranges work and sequence of steps to be taken to complete tasks in an effective manner.

LEARNING AND COMPREHENSION

Assimilates instructions and grasps the principles of work tasks with minimal assistance.

ABILITY TO FOLLOW INSRUCTIONS

1. Comprehends and utilizes verbal instructions.
2. Comprehends and utilizes written instructions.
3. Comprehends and utilizes diagrams.
4. Comprehends and utilizes demonstrations.
5. Comprehends and utilizes models.

JOB SEEKING SKILLS

1. Completes application form.
2. Answers problem questions.
3. Explains skills.
4. Utilizes appropriate mannerisms.
5. Demonstrates enthusiasm for work.
6. Knows where to look for jobs.

PHYSICAL APPEARANCE

1. Attire: Wears clothes that are clean, neat, and appropriate to setting.
2. Hygiene: Exhibits hygiene skills by having face/hands clean, hair washed, no detectable odors, and teeth brushed.

STAGE 2 - Observation

ASSET	ACCEPTABLE	LIMITATION	SKILL FACTORS CHECKLIST (CONT.)
+	.	-	

3. Grooming: Exhibits grooming skills by having hair combed, face shaved, beard/moustache trimmed, and utilizing cosmetics appropriately.

PUNCTUALITY

1. Showed up on time for appointment.
2. Returned from breaks as scheduled.

INTERPERSONAL SKILLS

1. Processes and communicates information concerning ideas and needs in a clear and meaningful manner.
2. Establishes and maintains friendly work relationship with others.

SUPERVISION

1. Amount Required: Completes tasks with minimal support and/or assistance once intitial instructions are given. Makes own decisions and does not rely on others for guidance.
2. Response to Authority: Accepts direction from supervisor and complies with requests.
3. Requests for Assistance: When necessary and relevant, requests assistance and does so in an appropriate and timely manner.

WORK ATTITUDE

1. Personal Complaints: Voices complaints only when solicited from supervisor or relevant and appropriate to the situation. Complaints, if any, are infrequent and not disruptive to performance.
2. Approach to Work: Approaches work in positive manner, expresses desire to work and willing to take steps necessary to achieve vocational goals.
3. Initiative: Self-starts within the limits of instruction and general work regulations. Is usually in a state of readiness to work. Utilizes off-task time constructively.

Vocational Assessment Observation Checklist

Name:_____ School:_____

COOPERATION

_____Openly uncooperative
_____Reluctant to cooperate
_____Ordinarily cooperative
_____Stimulates cooperation

ATTITUDE TOWARD LEARNING

_____Resists training
_____Accepts training under pressure
_____Appears indifferent to training
_____Willingly accepts training
_____Seeks more training

RESOURCEFULNESS

_____Difficulty in solving problems
_____Rarely offers a solution
_____Average supply of solutions
_____Resourceful
_____Exceptional in problem solving

INITIATIVE

_____Never initiates
_____Waits for others to start
_____Average initiative
_____Frequently goes ahead
_____Unusually self-relient

QUALITY OF WORK

_____Generally unacceptable
_____Poor performance on work samples
_____Work unusually passable
_____Few errors
_____Consistently good job

ATTITUDE TOWARD AUTHORITY

_____Resents authority
_____Accepts with resistance
_____Appears with resistance
_____Evidences accepting authority
_____Appreciates need for authority

INTEREST

_____Totally uninterested
_____Disinterested for the most part
_____Shows varying degrees of interest
_____Well developed interests
_____High specific and general interests

SAFETY

_____Dangerously careless
_____Needs frequent reminding
_____Takes average precautions
_____Careful
_____Unusually safety conscious

USE OF TOOLS AND MATERIALS

_____Misused most tools & material
_____Misused some tools & material
_____Satisfactory use of tools
_____Used most equipment correct
_____Competent use of all tools

PERSONAL BEHAVIORS

_____Is punctual
_____Acceptable grooming
_____Attends regularly

SOCIAL BEHAVIORS

_____Gets along well with others
_____Cooperates with others
_____Shows acceptable social skill
_____Prefers to work alone

WORK BEHAVIORS

_____Vitality or work energy
_____Stamina for a full work day
_____Consistent work effort
_____Easily distracted from work
_____Reacts positive to unpleasant work or tasks
_____Acceptable work methods
_____Demonstrates planning and organizational skills
_____Ability to cope with problems
_____No unpleasant work habits
_____Requires modifications of instructional materials

STAGE 2 - Observation

JOB READINESS ASSESSMENT CHECKLIST

Please complete the following, using data you have gathered from observing the student's work habits/attitudes and academic performance in all phases of school work and other related work experience.

Student's Name	Grade	B.D.	School
Address	Program	Teacher	Date

WORK HABITS:	ALWAYS	USUALLY	SELDOM
1. Absence from work/school for excused reason only.			
2. Reports to school/work on time.			
3. Dresses appropriately for school/work setting.			
4. Retains and follows instructions given the first time.			
5. Asks for clarification immediately when instructions are not understood.			
6. Checks work for acceptable performance.			
7. Avoids repeating past errors.			
8. Able to concentrate on task.			
9. Demonstrates correct use of equipment and materials.			
10. Cleans area/returns work supplies to proper places.			
11. Makes efficient use of school/work time.			
12. Requires minimal supervision in school/work setting.			
13. Complies with safety rules.			
14. Rate of production is at 75% or better of the average standard.			
15. Demonstrates good grooming. (Body, teeth, hair, clothes, etc.)			

STAGE 2 - Observation

CESA #6 FUNCTIONAL ASSESSMENT SCREEN

This is a list of skills that will greatly help in making a successful adjustment to life after high school. Circle the number by each item that best represents the student's status or need at this time. Ratings need to be based on age or developmental level appropriateness. Use the following scale:

4	Independent	This skill is fully developed. Student is able to do this with no help.
3	Some Help Needed	There is some knowledge or ability in this area. More information or skill development is required.
2	No Knowledge	Student has no awareness or ability in this area.
1	Not Applicable	This item does not apply at this time.

I. Money Management	Independent	Some Help Needed	No Knowledge	Not Applicable
Identify Coins & Paper Values	4	3	2	1
Makes Wise Purchases	4	3	2	1
Basic Banking Skills	4	3	2	1
Basic Budgeting Skills	4	3	2	1
Calculate Taxes	4	3	2	1
Identifies/uses local agencies/services able to providing counseling/support.	4	3	2	1

II. Personal/Domestic Management	Independent	Some Help Needed	No Knowledge	Not Applicable
Proper Eating Skills	4	3	2	1
Plans for Proper Nutrition	4	3	2	1
Purchase Food	4	3	2	1
Prepare Meals	4	3	2	1
Home Cleanliness	4	3	2	1
Food Storage	4	3	2	1
Safety Practices	4	3	2	1
Use of Appliances/Tools	4	3	2	1
Proper Grooming/Hygiene	4	3	2	1
Proper First Aid Practices	4	3	2	1
Marriage & Family Issues	4	3	2	1
Handle Emergency Situations	4	3	2	1
Identifies/uses local agencies/services able to provide counseling/support.	4	3	2	1

III. Personal/Social Skills	Independent	Some Help Needed	No Knowledge	Not Applicable
Identifies Emotions	4	3	2	1
Identifies Needs	4	3	2	1
Accept Praise	4	3	2	1
Accept Criticism	4	3	2	1
Express Feelings of Worth	4	3	2	1
Develop Self Confidence	4	3	2	1
Demonstrates Acceptable Character Traits	4	3	2	1
Demonstrates Acceptable Behaviors in Public	4	3	2	1
Demonstrates Acceptable On-The-Job Behaviors	4	3	2	1
Respects the Property and Rights of Others	4	3	2	1
Demonstrates Acceptable Reaction to Authority	4	3	2	1
Makes and Maintains Friendships	4	3	2	1
Demonstrates Good Listening Skills	4	3	2	1
Responds Appropriately to Others	4	3	2	1
Contributes in Group Activities	4	3	2	1
Identifies/uses local agencies/services able to provide counseling/support.	4	3	2	1

IV. Self Advocacy Status	Independent	Some Help Needed	No Knowledge	Not Applicable
Describes Personal Disability and its Impact	4	3	2	1
Describes Personal Learning Style.	4	3	2	1
Describes Most Effective Learning/Teaching Strategies.	4	3	2	1
Demonstrates Good Organizational Skills	4	3	2	1
Demonstrates Acceptable Goal Development Skills	4	3	2	1
Demonstrates Good Decision Making Skills	4	3	2	1
Understands Local Laws	4	3	2	1
Understands Legal Rights and Responsibilities	4	3	2	1
Understands Workplace Rights and Responsibilities	4	3	2	1
Understands Government Services	4	3	2	1
Identifies/uses local agencies/services able to provide counseling/support	4	3	2	1

V. Transportation Status	Independent	Some Help Needed	No Knowledge	Not Applicable
Finds Way Around School Building/Grounds	4	3	2	1
Finds Way Around Local Community	4	3	2	1
Demonstrates Safety Practices	4	3	2	1
Able To Use Public Transportation	4	3	2	1
Able To Read and Follow City and Road Maps	4	3	2	1
Has a Driver's License	4	3	2	1
Able to Drive a Vehicle	4	3	2	1
Identifies/uses local agencies/services able to provide assistance.	4	3	2	1

VI. Recreation Status	Independent	Some Help Needed	No Knowledge	Not Applicable
Understands the Value of Recreation	4	3	2	1
Understands the Value of Good/Physical Fitness	4	3	2	1
Identifies Recreation Interests and Abilities	4	3	2	1
Able to Play Individual Games	4	3	2	1
Able to Play Group Games	4	3	2	1
Able to Plan and Choose Activities Wisely	4	3	2	1
Demonstrates Recreation Safety Practices	4	3	2	1
Demonstrates Acceptable First Aid Practices	4	3	2	1
Able to Plan Vacations	4	3	2	1
Identifies/uses local recreation agencies/services	4	3	2	1

VII. Employment Preparation/Training Readiness	Independent	Some Help Needed	No Knowledge	Not Applicable
Reading Ability is at Potential	4	3	2	1
Math Ability is at Potential	4	3	2	1
English/Written Language is at Potential	4	3	2	1
Spelling Ability is at Potential	4	3	2	1
Speaking Ability is at Potential	4	3	2	1
Able to Identify the Value of Work	4	3	2	1
Identifies Career Interests	4	3	2	1
Identifies Career Abilities	4	3	2	1
Identifies Career Values	4	3	2	1
Identifies Strategies that Enhance Personal Learning	4	3	2	1
Identifies Career Needs	4	3	2	1
Identifies Career Clusters	4	3	2	1
Identifies Realistic Jobs/Training Needed	4	3	2	1
Demonstrates Good Job Search Skills	4	3	2	1
Able to Follow Directions	4	3	2	1
Able to Accept Supervision	4	3	2	1
Able to Work with Others	4	3	2	1
Has Good School/Work Attendance	4	3	2	1
Is Punctual	4	3	2	1
Able to do Quality Work	4	3	2	1
Work at a Satisfactory Rate	4	3	2	1
Follows Safety Rules	4	3	2	1
Identifies/uses local employment/ employment training agencies/colleges/services able to provide counseling/educational placement/support.	4	3	2	1

CAREER EXPLORATION

STAGE III

CAREER EXPLORATION

The third stage of functional vocational assessment is career exploration. *Career exploration, planning, and decision making* are the processes by which elementary and secondary pupils identify and evaluate life and work choices, explore and plan career goals, and acquire realistic decision-making skills. While most employers are willing to provide some on-the-job training, few want new employees to use a job in their firm as a career exploration experience. School counselors have established guidance programs to assist students in preparing and planning for postsecondary educational opportunities and often help students learn about careers, apprenticeships, local labor market needs, community job requirements, job-seeking and application skills, and general employment skill development. Education for employment provides a framework for K-12 career exploration, planning, and decision making through a curriculum and program that systematically and comprehensively stresses developmental stages of career awareness. This stage includes exploration via career information materials, job shadowing, community speakers, local business visits, post-secondary education shadowing, and work samples. In this stage, the student gains a better understanding about the types of work available, what skills or education are required for jobs he/she has interests and aptitudes in and how he/she will fit into the work environment.

Career exploration is an integral part of the Functional Vocational Assessment. Peterson (1985) listed as one of the criteria for effective vocational assessment the need for the assessment to be student centered so that students are aided in making their own vocational decisions. Career exploration facilitates the above criteria by providing students with information about themselves, the world of work and their abilities and needs as they relate to work. Through this process students become more informed and better able to make vocational decisions. School response in this area must begin early and follow through to graduation from high school. Eventual career choice is part of the *total* developmental process. The questions, "What sort of person am I?", "What do I want to be when I grow up?", and "What can I really do with my life?" are the beginning of the career exploration and planning component of education for employment.

A career exploration and planning program must be developmentally based in order for it to be meaningful. Coupling a knowledge of their own interests, abilities, aptitudes, and attitudes with information about the realities of the world of work, current labor market information, non-traditional career opportunities, job hunting skills, and educational opportunities provides students a sound base for choosing a future occupation.

The Wisconsin Developmental Guidance Model suggests that an organizational structure be established that incorporates the resources of counselors, pupil service personnel, teaching staff, administration, parents, community members, and business and industry representatives in a cohesive, programmatic response.

COMPONENTS OF CAREER EXPLORATION, PLANNING, AND DECISION MAKING

The process of career exploration consists of the following systematic phases.

- A curriculum is provided for all students at the middle/junior high school level. It emphasizes appropriate activities to assist students to understand their own interests, abilities, and aptitudes. Information should be incorporated on the world of work to allow students an opportunity to set meaningful goals for the future. Socioeconomic factors affecting life/work choices are stressed. Deliberate emphasis is given to new, emerging and nontraditional career choices. The existence and historical consequences of sex-role stereotyping in employment are addressed throughout K-12. School district personnel place equal emphasis on all post-high school options---occupational, vocational, and educational.

- Students are taught the need and the processes for evaluation of careers related to interests, aptitudes and attitudes through materials found in Job Centers, Career Centers, guidance office, Wisconsin Technical College System districts, and/or classroom materials. Career information materials provide important data on available jobs , schooling required, pay, advancement opportunities and availability of the job in the future. Students should evaluate jobs in which they have shown an interest and aptitude. Guidance by a qualified guidance counselor or vocational instructor will help the student eliminate many jobs that would be inappropriate because of skill level or abilities of the student. However, it is critical that the special educator be involved in these discussions with the students to insure that adaptations and accommodations are considered when making these decisions. Students should be prepared by their special education programs to fully understand the implications of their disability upon career decisions and to advocate for necessary adaptations in the work place as well as in the vocational education program at school. Information from this phase is important throughout the rest of the career exploration stage.

- After the student has had an opportunity to evaluate vocational areas through the curriculum, vocational materials and counseling, all students must have the opportunity to explore career options through planned activities such as career fairs, field trips, work experience programs, shadowing, speakers, and/or business visits. These activities provide opportunities for students to ask questions of someone who actually holds the job in question and to heighten his/her job awareness.

- Career evaluation through the use of vocational classroom or community based work samples provides students with the opportunity of evaluating skills necessary for the desired job by using actual equipment of the job and applying skills in a natural setting. Many students have limited work experiences in their community. Defining skills needed in the work environment can be difficult to

impossible for many of these students because of their limited experiences. Vocational classroom or community based work samples will give the student an opportunity to increase this experience level while defining skills needed in the job and working environment. It also provides students feedback on how their interests and abilities match the job. Sitlington (1979) defined a work sample as a "simulated representation of work tasks which may or may not represent an actual job or a component of a job." The Vocational Evaluation and Work Adjustment Association (VEWAA) stated that a work sample is a well defined work activity involving tasks, materials and tools which are similar or identical to those in an actual job or cluster of jobs. It is used to assess an individual's vocational aptitude, worker characteristics, and vocational interests. Through the work sample, a student can assess his/her ability to perform actual tasks that will be found on the job while deciding/determining actual interest in the vocational area. Work samples in this stage should focus on the ability of the student to perform the tasks needed on the specific job. Peterson (1986) describes task-oriented work samples as having a primary focus on the assessment of abilities to perform specific tasks of a job.

Vocational work samples may be set up in a vocational classroom or at an employment site in the area. These sites should provide the student with experiences that simulate the work environment as closely as possible. Community based work samples generally require more time and monitoring by the staff than the classroom work samples but are a more reliable assessment practice. Samples on actual work sites provide a realistic environment for students to assess skills needed for the job and actual interest in the job. **We strongly support community based work sampling which provides a realistic environment and is eminently less expensive than setting up artificial work samples.** If community based work experiences were provided for all students prior to school exit, there would be no need for "sheltered work" after school for the majority of students with disabilities. Work samples should occur at the end of the career exploration stage after a student has had the opportunity to determine his/her interests and aptitudes.

- Follow-up studies are developed to determine the success of post-high school transition for all students and results are used to modify existing curricula.

Implementing the Career Exploration, Planning , and Decision Making Process described above should enable the student to demonstrate the following competencies.

CAREER EXPLORATION COMPETENCIES

Personal Capabilities and Interests

- Explain special aptitudes and/or abilities.

- Explain implications of disability on specific careers and need for adaptations.
- Identify personal interests.
- Identify career interests for future career direction.
- Identify transferable work skills/work experience.
- Identify personal traits (strengths, values).
- Assess and practice good health habits, such as weight control, good nutrition, exercise, relaxation, sleep, and having periodic physical examinations.
- Demonstrate understanding and acceptance of self and others.
- Demonstrate problem-solving skills.

Career Planning

- Make decisions about likes and dislikes.
- Define self in relation to future careers.
- Identify important personal and work values.
- Recognize the differences between needs/wants/values and their role in career decisions.
- Select careers or vocational goals which are consistent with interests, values, and labor market trends.
- Acquire general information about the occupational/career field.
- Identify training, education, experience, and requirements needed to pursue selected career.
- Identify job entry requirements for selected careers.
- Develop short- and long-term plans to achieve goals.
- Identify motives for moving up a career ladder, such as self-fulfillment, money, recognition, desire to learn more, creativity, more authority, more responsibility, and desire to do different job tasks.
- Identify the skills necessary for appropriate work adjustment and work habits.

Labor Market Awareness

- Describe economic and technological trends that may affect the work environment.
- Identify ways in which employees may have to adapt to a changing work environment.
- Describe skills necessary for job retention.
- Identify entry level salary and potential for advancement in selected careers.
- Describe future job availability in selected careers.
- Maintain information about each job experience, references and related coursework in a portfolio.
- Identify the behaviors required in a working environment.

Consumer Skills

- Develop a personal budget based on estimated income to fit personal needs and wants, listing both fixed and variable expenses.
- Identify ways to balance a budget.
- Determine the cost and value of borrowing money.
- Identify important reasons for having savings.

Jobs of interest should be narrowed to five or fewer during the planned activities phase of the career exploration stage providing more intense evaluation in each area. Teachers should keep data on students interested in similar vocational areas to maximize use of shadowing experiences, vocational speakers and/or business visits. This information needs to be coordinated through the local School to Work Program to provide consistency and a single point of contact. During the work try out phase, students should narrow their job choices to three or fewer. Work samples should not be set up until students have had time and guidance in evaluating all areas of interest and aptitude. If, by the end of the work try out phase, students are still unsure of major areas of interests the career evaluation process within the exploration stage should be continued.

After determining jobs that relate to areas of aptitude and interests, students should receive counseling to determine what vocational program is appropriate and if work study placement is appropriate. If more information is needed, the student should move on to the fourth stage of the flow chart, situational assessment.

The following forms facilitate career exploration activities.

Investigator's Journal

Complete this sheet for each occupation under study; include at least one nontraditional career.

OCCUPATION UNDER STUDY:

WORK DESCRIPTION (main duties of job or field):

JOB REQUIREMENTS (physical abilities needed, aptitudes, etc.):

COURSE PREPARATION/TRAINING:

High school courses needed or preferred:

Education beyond high school:

HOW DO YOU AND OCCUPATION FIT:

Skills:

Values:

Home/Family Considerations:

SALARY:

ADVANTAGES/DISADVANTAGES:

RELATED OCCUPATIONS:

Developed by Nancy Deutsch and Roberta Gassman For Women's Education Resources, UW-Extension and Bureau for Vocational Education, Wisconsin Department of Public Instruction

Informational Interview: Investigator's Questions

Use these suggested questions in the informational interview. Use the backside for additional comments.

Occupation under study: _____

Name of employing organization: _____

Name of person interviewed: _____

Suggested Investigator's Questions:

How long have you worked in this job? _____

How did you get into this type of work? _____

_____

What is a typical day like for you? _____

_____

What are your major responsibilities? _____

_____

What do you like best about your job? _____

_____

What do you like least about your job? _____

_____

What high school course preparation is needed? Preferred? _____

_____

How much general education is required? _____

What kind of education is required? (Technical training, college, on-the-job training, apprenticeship, graduate school, etc.?) _____

_____

Is union membership required? _____

(continued)

What are the physical demands of the work? _____

_____

What special abilities are needed? Skills? _____

_____

What is your schedule like? Is part-time work available? Do you work overtime? _____

_____

What is the typical starting wage or salary? Fringe benefits? (Training, health insurance, etc.) _____

_____

What chances for advancement are there? For women? For men? _____

_____

What barriers exist for men entering this field? _____

_____

What barriers exist for women entering this field? _____

_____

What barriers exist for minorities entering this field? _____

_____

What barriers exist for handicapped persons entering this field? _____

_____

How does this type of work affect your lifestyle? Home and family obligations? _____

_____

_____

What are some related occupations? _____

_____

Whom else would you suggest I talk to for more information about this field? _____

_____

Developed by Nancy Deutsch and Roberta Gassman For Women's Education Resources, UW-Extension and Bureau for Vocational Education, Wisconsin Department of Public Instruction

Module 9
Handout 42

Enrichment Through Leisure and Recreational Activities

A. **Activities I Like To Do Now**

Review the list completed in handout 2, "My Favorite Activities." You may use the same activities or add and delete.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

B. **Skill Categories**

	Column 1 Things I Like To Do Now	**Column 2** Things I Would Like To Learn To Do
Manual (e.g. woodworking)		
Physical (e.g. tennis)		
Intellectual (e.g. chess)		
Artistic (e.g. painting)		
Useful (e.g., Scout newspaper collection)		
Sociable		

(Continued)

C. **New Activities/Skills From My Group That Interest Me** (e.g., if you never thought about wind sailing and may now be interested)

_____

_____

_____

_____

D. **Something I Would Like to Learn To Do**

E. **A First Step I Might Take to Learn It**

POLICY HANDBOOK FOR WORK-BASED TRANSITION ACTIVITIES

Guest Speakers, Employment Tours, and Job Shadows

1995-96 School Year

Prairie du Chien, Seneca, Wauzeka, Kickapoo High Schools

Wisconsin's Design for Transition Success Project

Developed by: John Triphan, CESA #3, Crawford County Transition Coordinator

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GUIDELINES FOR
WORK-BASED TRANSITION ACTIVITIES:
Guest Speakers, Employment Tours, and Job Shadows

Wisconsin Design for Transition Success

PURPOSE:

"Career Awareness, Exploration, and Counseling: Section 102 makes provisions for - (1) career awareness and career exploration and counseling (beginning at the earliest possible age, but not later than seventh grade) in order to help students who may be interested to identify and select or reconsider their interests, goals, and career majors, including those options that may not be traditional for their gender, race, or ethnicity."

Policy Update - Youth with Disabilities and the School To-Work Opportunities Act of 1994. National Transition Network, Summer, 1994.

These three awareness/exploration activities: guest speakers, employment tours, and job shadows can assist students in their career development and move them along their path toward a life-long satisfying career.

DEFINITIONS:

Guest Speakers - this awareness/exploration transition activity is designed to provide students with the opportunity to meet and hear an employer or employee in their high interest career area speak about the details of their own job or about the jobs of others. By learning the guest speaker's job title, job duties, education/training requirements, salary, job outline, and other specifics regarding the job the students can sharpen their focus regarding their own personal career goals and interests.,

Employment Tours - this awareness/exploration transition activity is designed to provide students with the opportunity to visit an employment site in their high career interest area to learn the major function of the institution, the major jobs available, outlook for the institution, working conditions, etc. This activity can assist the students in their career development by helping them identify their future career goals and interests.

Job Shadows - this awareness/exploration activity is designed to provide students with the opportunity to shadow a specific job/employee to learn the specific job duties, working conditions, qualifications, training and educational requirements, earnings, outlook, etc. of the job. The student and employee are "elbow-to-elbow" for approximately five hours in an intimate exchange regarding the specific job. This transition activity can assist the students in their personal career development by giving them a real life encounter with the world of work in their high interest career area.

PARTICIPATION:

Participation in the transition activities of guest speakers, employment tours, and job shadows can "help students who may be interested to identify and select or reconsider their interests, goals, and career majors . . . "

Students need to work with their guidance counselors and teachers to determine their high career "interest areas". The interest areas are artistic, scientific, plants and animals, protective,

mechanical, industrial, business detail, selling, accommodating, humanitarian, leading-persuading, and physical performing. These interest areas are further divided into 66 work groups and 348 subgroups in The Enhanced Guide for Occupational Exploration (EGOE) published by JIST Works, Inc., Indianapolis, IN, 1991. Participation in these transition activities will be reserved for those students who have an identified interest area as defined by the EGOE and have been recommended by their guidance counselor and/or Transition Action Team. The guidance counselor from each school will provide the transition coordinator with a school total of participants for each activity three weeks prior to the scheduled activity date.

A limit of 20 participants total for each transition activity has been set due to space limitations. Cancellations need to be communicated to the transition coordinator as soon as possible at CESA #3 (800/261-0000).

TIME/PLACE:

Guest speakers are scheduled from 10:00 - 11:30 a.m. at Commerce Court Mall, 710 E. Blackhawk Ave., Prairie du Chien - in the room reserved for Southwest Wisconsin Technical College. **Please note the exceptions!!**

Employment tours are scheduled from 1:00 - 2:30 p.m. at the tour site. **Please note the exceptions!!**

Job shadows will be arranged on a student by student basis.

REACTION SHEETS:

All participating students will complete the following required assignments for the appropriate transition activity.

1) Employment Site Tour Reaction Sheet (pages 7 & 8)

2) Job Shadow Reaction Sheet (pages 9 & 10)

3) Guest Speaker Reaction Sheet - Personal Job of Speaker, or (pages 11 & 12)

4) Guest Speaker Reaction Sheet - Job of Others (pages 13 & 14)

These representations (reaction sheets) of the career awareness/career exploration transition activities are useful for inclusion into the students' career portfolios.

EMPLOYMENT SITE TOUR REACTION SHEET

Student's Name: _____ Tour Date: _____

Directions: Please answer the following questions concerning the tour you have just participated in. If you have any questions ask your teacher for help.

1. Name the place you visited on your field tour.

   _____

2. State the major function(s) of the place toured.

   _____

   _____

3. Name three jobs that you observed.

   a. _____

   b. _____

   c. _____

4. Was the company or business hiring new employees?

   Yes ___ No ___

   How do you know? _____

   _____

5. Would you like to work for this company or business?

   Yes ___ No ___

   Why or why not? _____

   _____

6. Did the workers work inside or outside?

   _____

7. Did the workers work alone or with others?

   _____

8. Were the surroundings noisy or quiet?

   _____

9. Name three things you learned from this tour?

   1. _____

   2. _____

   3. _____

10. How did this tour help you?

_____

_____

_____

_____

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JOB SHADOW REACTION SHEET

Student's Name: _____ Date of Shadow: _____

Directions: Please give the following information about the job you shadowed. If you have any questions ask your teacher for help.

1. State the name of the company you visited. _____

2. State the job title of the job you shadowed. _____

3. List the job duties. _____

4. List the working conditions. _____

5. State the personal qualifications needed for the job. _____

6. State the education and training needed for the job. _____

7. List the earnings and hours for the job. _____

_____

_____

_____

8. State the outlook for the job. _____

_____

_____

_____

9. Would you like to perform this job in the future? (why or why not)?

_____

_____

_____

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GUEST SPEAKER REACTION SHEET

(Personal Job of Speaker)

Student's Name: _____ Date: _____

Directions: Please answer the following questions that apply to this speaker's presentation. If you have any questions ask your teacher for help.

1. State the speaker's name and place of employment.

_____

_____

2. State the speaker's job title(s).

_____

_____

3. Describe the speaker's job by listing at least five job duties that he/she performs.

a. _____

b. _____

c. _____

d. _____

e. _____

4. Check the education or training requirements that apply to this job.

___ Less than high school

___ High school graduate

___ Vocational-Technical training beyond high school

___ Vocational training on high school level

___ College education required

___ Apprentice Training

___ In-plant or on-the-job training

___ Other (describe) _____

_____

5. State the salary range for the speaker's job

_____

6. Are there job openings?

   a. ___ very limited

   b. ___ moderate number of openings

   c. ___ jobs usually available

7. State two things you learned from this speaker.

   a. _____

   b. _____

8. Was this speaker helpful to you?

   Yes ___ No ___

   Why or why not? _____

   _____

9. Where can you find more information about this job?

   _____

   _____

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CRAWFORD COUNTY SCHOOL-TO-WORK CAREER EXPO

Wisconsin Design for Transition Success

STUDENT REACTION SHEET

Student's Name:_____ Grade Level:_____ School:_____

I. Check-off your **two** high career interest areas you visited:

____ artistic	____ business detail
____ scientific	____ selling
____ plants and animals	____ accommodating
____ protective	____ humanitarian
____ mechanical	____ leading-persuading
____ industrial	____ physical performing

II. Check-off the **three** areas you visited in connecting activities:

____ Southwest WI Technical College	____ Military Recruiters (5)
____ Western WI Technical College	____ Division of Vocational Rehabilitation
____ University of Wisconsin-LaCrosse	____ Opportunity Center
____ University of Wisconsin-Richland Center	____ Job Service
____ University of Wisconsin-Platteville	____ Private Industry Council
____ Upper Iowa	____ JTPA (Job Trng. Partnership Act)
____ Viterbo	____ Community Action Programs

III. CAREER INTEREST AREA #1 REACTION

Directions: Choose one of the two presenters for your Career Interest Area and answer the following questions regarding this presenter's career.

1. State the name of the presenter: _____
2. State the job title for the presenter: _____
3. Describe how the presenter "got into" his/her career: _____

_____

_____

_____

4. List the job duties of the presenter's career (tasks): _____

5. State the personal qualifications the presenter has that is necessary for his/her career:

6. State the education and training necessary to enter the career of the presenter: _____

7. List the working conditions of the career area of the presenter (outside, inside, travel, hours, etc.): _____

8. List the earnings, career ladder, and related career areas to the presenter's career: _____

9. State the outlook for the presenter's career area: _____

10. Would you be interested in learning more about this career area? *(circle)* Yes No

If you circled "yes", please contact your school's guidance counselor.

IV. CAREER INTEREST AREA #2 REACTION

Directions: Choose one of the two presenters for your Career Interest Area and answer the following questions regarding this presenter's career.

1. State the name of the presenter: _____
2. State the job title for the presenter: _____
3. Describe how the presenter "got into" his/her career: _____

   _____

   _____

   _____

4. List the job duties of the presenter's career (tasks): _____

   _____

   _____

   _____

5. State the personal qualifications the presenter has that is necessary for his/her career:

   _____

   _____

   _____

6. State the education and training necessary to enter the career of the presenter: _____

   _____

   _____

7. List the working conditions of the career area of the presenter (outside, inside, travel, hours, etc.): _____

   _____

   _____

   _____

   _____

8. List the earnings, career ladder, and related career areas to the presenter's career:

_____

_____

9. State the outlook for the presenter's career area: _____

_____

_____

10. Would you be interested in learning more about this career area? *(circle)* Yes No

If you circled "yes", please contact your school's guidance counselor.

V. CONNECTING ACTIVITIES REACTION

Directions: List three connecting activities that you "checked-off" for item II. After visiting these activities complete the following:

1. Connecting Activity #1:

State how this agency may help you enter the career area of your choice: _____

_____

_____

_____

2. Connecting Activity #2:

State how this agency may help you enter the career area of your choice: _____

_____

_____

_____

3. Connecting Activity #3:

State how this agency may help you enter the career area of your choice: _____

_____

_____

_____

TECHNICAL COLLEGE TOUR REACTION SHEET

Student's Name: _____ Date of Tour: _____

Directions: Please answer the following questions concerning the technical college visit you have participated in.

1. State the name of the technical college you toured.

   _____

2. Name the degree program(s) you observed that are of interest to you.

   a. _____

   b. _____

   c. _____

3. What job(s) are you interested in preparing for?

   a. _____

   b. _____

   c. _____

4. Will a degree(s) from the technical college help prepare you for these jobs? Name the degree programs.

   a. _____

   b. _____

   c. _____

5. Would you be interested in returning to the technical school to shadow a degree program?

   Yes ___ No ___

6. If yes, name the programs?

   a. _____

   b. _____

   c. _____

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TECHNICAL COLLEGE DEGREE PROGRAM SHADOW REACTION SHEET

Student's Name: _____ Date of Shadow: _____

Check one: ___ 1st Shadow ___ 2nd Shadow ___ 3rd Shadow
Directions: Please answer the following questions concerning the technical college degree/career program shadow you have participated in.

1. State the name of the technical college where you shadowed the degree/career program.

   _____

2. State the title of the degree/career program you shadowed.

   _____

3. State the name(s) of the instructors you spoke to throughout your shadowing experience and list the courses they taught.

Instructor's Name:	Course:
a._____	a. _____
b._____	b. _____
c._____	c. _____
d._____	d. _____
e._____	e. _____

4. Name three (3) jobs that you would be prepared for if you earned a degree in the degree/career program you shadowed.

   a. _____

   b. _____

   c. _____

5. List the high school classes you have completed or are currently taking that would help you complete the degree/career program you shadowed.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

6. List the high school classes you will need to take in the future to prepare for this program.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

7. Would you consider attending this technical college after high school graduation and earn a degree in the degree/career program you shadowed?

   Check one: ___ Yes ___ No

   Why or why not?_____

   _____

   _____

8. Are you interested in shadowing another degree/career program at a technical college?

   Check one: ___ Yes ___ No
   If yes, please answer question #8. If no, please answer question #9.

9. Name the degree/career program you would like to shadow next.

   _____

   Name the technical college: _____

   Why would you like to shadow this degree/career program?

   _____

10. What are your future plans if you desire no future shadowing experiences?

    Check if you plan to:

    ___ Find a job and work. Where? _____

    ___ Join the military. What branch? _____

    ___ Go to college. Where? _____

    ___ I don't know.

    ___ Other. Please explain. _____

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CAREER PATHWAY CHECK

The purpose of this checklist is to assist you in your transition planning. Use it to help determine your career pathway status and needs during high school. It will enable you to develop a tentative school based career path which may include the establishment of a network with non-school sources as needed. You will need the help of others to get the greatest benefit. Use the directions that follow to complete your checklist.

- Use pencil. Erasing may be necessary. This plan is tentative, subject to change
- Use your career prep map. Your course selection and involvement in other school and non-school activities will have some effect as to where and how some items will be addressed.
- This checklist may be used to develop your IEP.
- ☐ (Yes) Place a check mark in the "Yes" square when each item is achieved.
- ☐ (NA - Not Applicable) Place a check mark in the "NA" square if the item does not apply to you.
- 1, 2, 3, 4 (In Process) Many items progress from year to year. Place a circle on each item. For many you will circle all four years by the time you are a senior.

Place an "X" through the number for each year if you are not satisfied with the progress you made. Get help whenever you feel it is necessary.

The numbers represent grades; one for 9th, two for 10th, three for 11th and four for 12th.

- 1, 2, 3, 4 (Com - Completed) Place a circle around the year that each item will be completed. For many, this probably will not be until year 4, the 12th grade. Place an "X" through the year you actually completed.
- [ ] (Source) Write in the source from where you will get or with whom you will work to complete each item. This could be a course, set of courses, program, agency, club, organization, employer, family or other applicable source.

☆1 Items with a ☆1 to their left correspond to Wisconsin Developmental Guidance Model (WDGM) Learning Competencies.

☆2 Items with a ☆2 to their left correspond to WDGM Personal/Social Competencies.

☆3 Items with a ☆3 to their left correspond to WDGM Career/Vocational Competencies.

Many of the other items can also be addressed within the WDGM especially when combined with other school programs.

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TRANSITION PLAN CHECKLIST

		YES	N/A	IP	COM	SOURCE
High School:	Emphasis on Applying Knowledge. Age and development levels determine reasonable expectations.	☐	☐	1, 2, 3, 4	1, 2 3, 4	
Career Development/ Guidance (Exploration-Preparation-Placement) I am able to:						
*☆3	understand and develop decision making skills	☐	☐	1,2 3,4	1,2 3,4	
*☆3	understand the world of work and its expectations for employment.	☐	☐	1,2 3,4	1,2 3,4	
*☆3	increase knowledge about personal interests and aptitudes and their applicability to education/work alternatives.	☐	☐	1,2 3,4	1,2 3,4	
*☆3	demonstrate an understanding of the changing male/female roles and this relationship to career choice.	☐	☐	1,2 3,4	1,2 3,4	
*☆3	demonstrate positive interpersonal skills necessary for work place productivity.	☐	☐	1,2 3,4	1,2 3,4	
*	utilize personal career data in formulating a career path as illustrated by the Career Prep Transition Plan (map).	☐	☐	1,2 3,4	1,2 3,4	
*☆3	demonstrate an understanding of lifestyle preferences and relate them to occupational interests.	☐	☐	1,2 3,4	1,2 3,4	
*	state 10 positive personal characteristics conductive to procuring and retaining employment.	☐	☐	1,2 3,4	1,2 3,4	
*☆3	set reasonable personal school, employment, and general life goals.	☐	☐	1,2 3,4	1,2 3,4	
*	write a theme or delivery a speech or state/demonstrate reasons on "Why You Should Hire Me".	☐	☐	1,2 3,4	1,2 3,4	
*☆3	increase knowledge and awareness of employment trends and opportunities during and after high school.	☐	☐	1,2 3,4	1,2 3,4	
*	Other:	☐	☐	1,2 3,4	1,2 3,4	

Y = Yes
NA = Not Applicable
IP = In Progress
COM = Completed

1 = 9th Grade
2 = 10th Grade
3 = 11th Grade
4 = 12th Grade

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Personal/Social Development I am able to:	YES	N/A	IP	COM	SOURCES
*☆2 demonstrate an understanding of physical emotional and intellectual growth and development.	☐	☐	1,2 3,4	1,2 3,4	
*☆2 learn to cope with change and plan for the future.	☐	☐	1,2 3,4	1,2 3,4	
*☆2 demonstrate acceptable human conflict resolution skills with peers and adults.	☐	☐	1,2 3,4	1,2 3,4	
*☆2 demonstrate an understanding and appreciation of personal capability and those of others.	☐	☐	1,2 3,4	1,2 3,4	
*☆2 demonstrate an understanding of personal relationship and how to establish an independent identity.	☐	☐	1,2 3,4	1,2 3,4	
*☆2 assume the responsibility for personal decisions.	☐	☐	1,2 3,4	1,2 3,4	
* make and retain friendships.	☐	☐	1,2 3,4	1,2 3,4	
* participate in activities with disabled and non-disabled friends.	☐	☐	1,2 3,4	1,2 3,4	
* distinguish between close relationships and acquaintances.	☐	☐	1,2 3,4	1,2 3,4	
* procure non-school agency/advocate parent support that will enable the development and maintenance of personal social skills.	☐	☐	1,2 3,4	1,2 3,4	
* Other:	☐	☐	1,2 3,4	1,2 3,4	

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Recreation/Leisure: I participates in:	YES	N/A	IP	COM	SOURCES
• school activities.	☐	☐	1,2 3,4	1,2 3,4	
• formal physical education activities.	☐	☐	1,2 3,4	1,2 3,4	
• personally identified leisure activities.	☐	☐	1,2 3,4	1,2 3,4	
• individual and group leisure/recreation activities.	☐	☐	1,2 3,4	1,2 3,4	
• activities that foster leisure activity research. (library facilities, new trends, games etc.)	☐	☐	1,2 3,4	1,2 3,4	
• procuring non-school agency advocate services that enable recreation/leisure activity participation and development during school and/or after school completion.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	
Academic I am able to:					
• demonstrate satisfactory progress.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate the ability to transfer knowledge and skills to other academics, vocational and career preparation areas.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate the ability to apply knowledge and skills in practical life situation.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	

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	Learning/Self Advocacy I am able to:	YES	N/A	IP	COM	SOURCES
*☆1	apply learning strategies in school subjects across the age and grade continuum.	☐	☐	1,2 3,4	1,2 3,4	
*	actively participate in IEP planning.	☐	☐	1,2 3,4	1,2 3,4	
*	express desire/needs effectively.	☐	☐	1,2 3,4	1,2 3,4	
*	use acceptable methods of assertiveness.	☐	☐	1,2 3,4	1,2 3,4	
*☆1	make acceptable personal choices/decisions/goals.	☐	☐	1,2 3,4	1,2 3,4	
*	communicate effectively with others.	☐	☐	1,2 3,4	1,2 3,4	
*	explain personal disability(s) and how it (they) affects learning.	☐	☐	1,2 3,4	1,2 3,4	
*☆1	explain personal strengths in the learning environment and how they can be used to increase learning.	☐	☐	1,2 3,4	1,2 3,4	
*☆1	explain instructional strategies that best enable personal learning to occur.	☐	☐	1,2 3,4	1,2 3,4	
*☆1	make reasonable school achievement goals.	☐	☐	1,2 3,4	1,2 3,4	
*	exhibit problem solving skills.	☐	☐	1,2 3,4	1,2 3,4	
*	become independent and self sufficient.	☐	☐	1,2 3,4	1,2 3,4	
*	state each applicable area service agency, its general services and the contact person's name, phone number, and address.	☐	☐	1,2 3,4	1,2 3,4	
*	have awareness of legislative acts that assist in meeting the needs of the disabled.	☐	☐	1,2 3,4	1,2 3,4	
*☆1	demonstrate an understanding of how the school curriculum and course selection impacts upon present and future career plans.	☐	☐	1,2 3,4	1,2 3,4	
*	Other:	☐	☐	1,2 3,4	1,2 3,4	

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Legal/Medical I:	YES	N/A	IP	COM	SOURCES
• am able to explain personal medical needs and take all medication independently.	☐	☐	1,2 3,4	1,2 3,4	
• am able to contact appropriate medical and/or legal services independently. (Private and public sources).	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate an understanding of personal rights and responsibilities of all citizens.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate an understanding of personal rights and responsibilities as a person with a disability.	☐	☐	1,2 3,4	1,2 3,4	
• have had or is involved in legal/medical services.	☐	☐	1,2 3,4	1,2 3,4	
• have applicable insurance coverage and knows where and how this can be obtained. (Both private and public sources.)	☐	☐	1,2 3,4	1,2 3,4	
• have parents who are aware of the need for estate planning and its strategies or already have a plan in place.	☐	☐	1,2 3,4	1,2 3,4	
• am or soon will be in need of legal and medical services and can procure them with help as needed through applicable non-school agencies/advocates, including parents.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	

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Post Secondary Education/Training I am able to:	YES	N/A	IP	COM	SOURCES
* state an interest and desire to pursue post-secondary training at ___ technical college, ___ college, ___ university, ___ vocational rehab. facility, ___ armed services, ___ proprietary school, ___ JTPA, ___ DVR, ___ Community Supported Employment, ___ Other.	☐	☐	1,2 3,4	1,2 3,4	
* state a need for assistance from an adult institution, agency or other advocate.	☐	☐	1,2 3,4	1,2 3,4	
* identify a specific post-secondary education/training institution, facility or service able to assist according to the personal career transition plan.	☐	☐	1,2 3,4	1,2 3,4	
* make application and follow applicable timeline requirements with help from parents and others as needed.	☐	☐	1,2 3,4	1,2 3,4	
* Other:	☐	☐	1,2 3,4	1,2 3,4	
Vocational Education I am able to:					
* evaluate vocational education courses as to personal interests and aptitudes.	☐	☐	1,2 3,4	1,2 3,4	
* determine vocational education course sequence applicable to the personal career prep transition plan (map).	☐	☐	1,2 3,4	1,2 3,4	
* utilize vocational education course evaluation data within the personal career prep transition plan.	☐	☐	1,2 3,4	1,2 3,4	
* utilize vocational education course evaluation data in planning for part-time employment within applicable DILHR guidelines.	☐	☐	1,2 3,4	1,2 3,4	
* successfully meet course safety rules and procedures.	☐	☐	1,2 3,4	1,2 3,4	
* participate in vocational education activities that meet personal developmental needs through in school and/or collaborative efforts with other agencies, advocates, and parents.	☐	☐	1,2 3,4	1,2 3,4	
* Other:	☐	☐	1,2 3,4	1,2 3,4	

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Employment Preparation/Placement I am able to:	YES	N/A	IP	COM	SOURCES
• participate in job shadowing experiences within clusters of interests, aptitudes and values.	☐	☐	1,2 3,4	1,2 3,4	
• participate in a work experience(s) relative to interests, aptitudes and values enabling the application of vocational education course(s) training.	☐	☐	1,2 3,4	1,2 3,4	
• participate in a work experience through school, outside agency and/or both that meets personal career profile.	☐	☐	1,2 3,4	1,2 3,4	
• obtain employment during summer recess for career exploration and/or preparation.	☐	☐	1,2 3,4	1,2 3,4	
• obtain employment upon school completion through independent action or outside agency/advocate/parent intervention.	☐	☐	1,2 3,4	1,2 3,4	
• follow agency/advocate application and timeline procedures with help as needed to obtain post-secondary employment.	☐	☐	1,2 3,4	1,2 3,4	
• state at least ten employment related personal abilities and/or attributes.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	

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Adult Services/Advocates I will:	YES	N/A	IP	COM	SOURCES
• need services from a non-school advocate agency(s)/advocates(s) to make a successful post-secondary transition.	☐	☐	1,2 3,4	1,2 3,4	
• receive services from a non-school agency(s)/advocate(s) immediately upon school completion.	☐	☐	1,2 3,4	1,2 3,4	
• make application and follow timelines of applicable non-school agency(s)/advocate(s) for needed services before school departure with help as needed.	☐	☐	1,2 3,4	1,2 3,4	
• be able to state services each advocate/agency provides.	☐	☐	1,2 3,4	1,2 3,4	
• receive parental support in arranging for applicable non-school services needed during and/or after school completion.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	
Independent Living I am able to:					
• demonstrate acceptable health and hygiene/abilities and habits.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate acceptable self-help management skills.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate acceptable consumer skills.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate acceptable home/apartment management skills.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate acceptable safety skills.	☐	☐	1,2 3,4	1,2 3,4	
• demonstrate an understanding of the cost of living and one's lifestyle.	☐	☐	1,2 3,4	1,2 3,4	
• express realistic personal options and preferences for living arrangements after school completion.	☐	☐	1,2 3,4	1,2 3,4	
• obtain parental support as needed in arranging for applicable non-school services needed during school and/or after school completion. (SSI, Social Services, DCP, ARC, etc.)	☐	☐	1,2 3,4	1,2 3,4	
• Other: •	☐	☐	1,2 3,4	1,2 3,4	

Y = Yes
NA = Not Applicable
IP = In Progress
COM = Completed

1 = 9th Grade
2 = 10th Grade
3 = 11th Grade
4 = 12th Grade

9/93

CESA No. 6 Transition Resource Handbook, 1993-94 School Year, CESA No. 6 Transition Leadership Cadre, Anthony Evers, Ph.D. - Administrator; Mr. John Kotek, Director of Special Education, 1993.

Community Involvement I am able to:	YES	N/A	IP	COM	SOURCES
• successful use of community public service institutions, businesses, other facilities.	☐	☐	1,2 3,4	1,2 3,4	
• show improvement in citizenship knowledge and behavior.	☐	☐	1,2 3,4	1,2 3,4	
• successfully demonstrate positive citizenship attributes.	☐	☐	1,2 3,4	1,2 3,4	
• register to vote.	☐	☐	1,2 3,4	1,2 3,4	
• register for selective service (as applicable).	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	
Transportation/Mobility I am able to:					
• find own way in the community.	☐	☐	1,2 3,4	1,2 3,4	
• use local community transportation system(s).	☐	☐	1,2 3,4	1,2 3,4	
• use other safe available means of transportation.	☐	☐	1,2 3,4	1,2 3,4	
• obtain a driver's license to become more independent.	☐	☐	1,2 3,4	1,2 3,4	
• read and follow road maps.	☐	☐	1,2 3,4	1,2 3,4	
• procure support from non-school agency(s)/advocate(s) with help as needed, during school and/or after school completion.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	

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Family Relationships I:	YES	N/A	IP	COM	SOURCES
• have parents who are good advocates	☐	☐	1,2 3,4	1,2 3,4	
• have parents who are aware of and if needed, use non-school service agencies. (Social Services, Social Security, DVR, SSA, etc.)	☐	☐	1,2 3,4	1,2 3,4	
• have parents who are aware of government legislation pertaining to personal needs. (IDEA, COP, CIP, SSI, Medicare, ADA, etc.)	☐	☐	1,2 3,4	1,2 3,4	
• have been or is involved in family counseling.	☐	☐	1,2 3,4	1,2 3,4	
• have a knowledge of positive family dynamics and parenting skills that will better enable positive adult partner relationships and parenting success.	☐	☐	1,2 3,4	1,2 3,4	
• Other:	☐	☐	1,2 3,4	1,2 3,4	
Other I need to be involved in:					
• or advocacy from additional services not included in this transitional plan checklist.	☐	☐	1,2 3,4	1,2 3, 4	

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SITUATIONAL ASSESSMENT

STAGE IV

SITUATIONAL ASSESSMENT

Preparing students with disabilities for employment is a complex challenge. When a student reaches the fourth stage of the Functional Vocational Assessment Model, not only do we need to consider the information from the three previous stages, we must also take into account the individual's ability to meet the environmental requirements of a job. This includes such factors as the diversity within a work situation, the social demands of a job, and the variety of tasks required to complete any one job. In order to assess a student in all of these areas, it will be necessary to use a comprehensive approach such as situational assessment. The primary purpose of situational assessment is to observe, record, and interpret the vocational behaviors of an individual in group work situations in various settings. These settings can be community-based training sites, or job sites within local business or industry. The rationale for conducting an assessment at an actual work site is two-fold. First, it provides students with an opportunity to discover the many factors associated with a job experience. Second, it moves the school personnel into the field in order to evaluate the student under realistic conditions (Brolin, 1982). The process of situational assessment consists of the following systematic phases:

1. **The planning and scheduling of observations includes reviewing the information from the first three stages of the assessment.** Prior to beginning the assessment or observation, it is necessary to determine the extent to which the student will need to be evaluated based on previous information gathered. It is also preferable to observe and assess briefly a substantial number of times rather than a few longer periods. This allows the observations to take place under varying circumstances and will more nearly reflect the student's typical behavior.

2. **The observing, describing, and recording of data requires the use of well-conceived and well-designed rating and observation forms .** The following steps should be adhered to when gathering information:
   (1) Specify the behavior(s) to be observed
   (2) Describe the training environment (job analysis)
   (3) Measure the initial strength of the behavior(s) (baseline)
   (4) Implement the modification plan as needed
   (5) Continue modification plan until behavior change can be shown or assessment is completed

The types of vocational behaviors that can be observed and assessed are:

1. ability to get along with co-workers and staff
2. ability to follow directions
3. ability to learn new tasks
4. speed of work

5. accuracy of work
6. frustration tolerance
7. safety
8. motivation
9. ability to follow simple to complex directions
10. punctuality
11. attendance
12. perseverance on a task
13. interpersonal skills
14. job interest
15. ability to stay with a job
16. attitudes

3. **Observational data should be organized, analyzed and interpreted.** Before analyzing and interpreting the data, information should be available concerning "normal work behaviors" expected in the work setting. This type of data can be obtained through observation of current employees or questionnaires. Data is best gathered by the same person each time in order to maintain consistency and decrease observer error.

4. **Observational data must be considered along with the interest, aptitude, and other interview inventories already administered.**

The effectiveness of situational assessment depends on the sensitivity and skill of the staff in observing and collecting data. Of primary importance is placing the student in a work situation that will permit the essential work related behaviors to be observed. This is critical that the data provide enough information about the student in a work environment so specific behavioral deficits can be discerned, modifications can be planned and progress can be assessed. The development of job try-out sites involves locating employers who are willing to provide work stations for this purpose. They can be established in two ways: students may be assessed in settings where there are specific job openings, or stations may be developed for student rotation with no chance for employment. A comprehensive assessment would include both of these approaches (Peterson, 1986). The assessment of the student should be carefully planned and a specific rating form for each type of job will need to be developed which includes skill requirements for the job and relevant work related behaviors.

This process although somewhat time consuming can provide the following advantages in the assessment of students with disabilities. It allows the student to be evaluated in a more natural setting, dispelling the anxiety often present during a formal test situation in an artificial setting. Evaluation takes place in the actual work environment, so the information gathered is totally experienced-based and more meaningful for the student and the evaluator. Finally, it gives the evaluator a chance to observe the student in several work situations under various conditions, which provides enough

data to make appropriate decisions for successful job placement. At this stage of the assessment process a student who has not been successfully placed in a work experience or training site, would then be reevaluated to determine a more appropriate setting, additional supports or adaptations, or to explore a different career path. At least by the student's sixteenth birthday, DVR and other community agencies if appropriate, who are responsible for transition services must be invited to the IEP committee to assist in this process of transition. They should be consulted throughout the functional vocational assessment, should be provided with assessment information at the IEP planning meetings and should provide necessary services for the student according to their statutory and financial requirements.

Following are procedures and forms to facilitate situational assessments.

1. KEY INFORMATION TO GATHER IN A SITUATIONAL ASSESSMENT

A. Functional usage of academics (e.g., math, time telling, reading, money, expressive language, written language)

- Is the student able to: tell time, balance a checkbook, use a calculator, read, write, etc.? How well can the individual do these things?
- What type of support facilitates the use of these skills?
- Adaptations needed?

B. Following directions

- How simple or complex do directions need to be in order for the student to follow them and complete work tasks (e.g., should directions be one step or three combined steps).

C. Behavior

- How does the student behave in various environments that are familiar and unfamiliar (i.e., is behavior appropriate). What support/intervention do you as a teacher provide to the individual during your time together? If the student behaved inappropriately, was there an obvious cause, or was he/she communicating a preference, etc.?

D. Learning Style

- Determine the modality strength of the individual (e.g., auditory, visual, tactile learner). Does a concrete or abstract direction make sense to the person, can he/she recall skills used earlier (i.e., memory), and is the person able to use language receptively and/or expressively?

E. Individual preferences

- These must be explored during IEP development (we suggest under "evaluation") and strongly taken into account when job matching. Logic dictates and IDEA requires that the student be invited to attend his/her IEP meetings to express preferences in all areas of program.

F. Individual strengths

- Emphasizing individual strengths will result in a higher quality job match.

G. Nature and intensity of supports needed in past

- Get a sense of what type of placement option an individual would do best in (i.e., individual, group)

Adapted from the **Functional Assessment Training Manual**, Institute for Supported Employment, University of Wisconsin-Madison, Department of Continuing and Vocational Education. John Thompson, Curtis Olson, Jill Wheeler, 1991.

- How much direct support will be necessary—initially, after two months, etc.

- What type of support will be best (i.e., learning style, training techniques, etc.)

H. Work history

- Learn as much as possible about an individual's past work history in order to capitalize on type of work environment, level of stimulation, interaction, and communication necessary for a successful work experience in the future.

I. Social skills/interactions

- Is the student able to engage in appropriate social skills and interactions during the assessment process?

- Is support/interaction necessary and/or appropriate (e.g., what type, and at what level)?

J. Communication (receptive and expressive)

- How does the student communicate expressively and receptively?

- Does the person utilize an alternative communication system?

- Does a communication system need to be developed, or further developed, for the individual?

- Is there a need for an interpreter?

K. Work endurance/stamina

- From the assessment process, make recommendations as to how many

hours the student will be able to work initially and over time.

L. Medical/physical status and management (including AODA issues)

- Investigate any relevant medical information that impacts upon the student (e.g., medication, seizures, side effects of medication).

M. Transportation needs

- Learn/explore available options for each individual's situation (e.g., taxi, bus, bike, car, walking, etc.)
- Will the student need assistance in learning how to get from school to work via transportation system? For how long?

N. Current financial information and concerns

- Any disincentives to work? Will benefits be affected (SSI, SSDI)?

O. Past education and training

- Where
- Dates attended
- Diploma/degree
- Favorite courses
- How well did the individual do?
- Any concerns during this time

P. Past work experience

- Where
- Dates employed
- Job title
- Responsibilities/duties
- How was job obtained?

- Hours/schedule—Were there problems with the schedule?
- Wages
- Likes/dislikes
- Transportation used
- Was there variety on job?

Q. Medication (and side effects)

- What
- Dosage
- When does the person take medication?
- Is he/she consistent?
- Attitude toward medication
- Side effects/symptoms
- Is the individual receiving help to deal specifically with the medication issue?
- Will this be a factor in considering work?

R. Job seeking skills

- Does individual have a resume, interviewing skills, etc.?

S. Family member/Community Services involvement

- Gather as much information from other appropriate sources as possible.
- Sources may include parents/guardians, residential staff, teachers, past job coaches, CSP/social workers, friends, etc.

T. Work related skills

- Can the student get from home to work independently and on time, communicate appropriately, occupy his/her time well during break, use

money to purchase snack/lunch, etc.?

U. Meaningful movements

- Is the student able to perform one motor movement volitionally? How does this movement or others assist the individual in self-help skills, the community, and ultimately doing a job? Are adaptations necessary?

V. Orientation/Mobility skills

- Orientation refers to an overall sense of direction (e.g., finding a building or a room in a particular building). Mobility indicates being able to move through an area from point (a) to point (b) successfully (e.g., moving from the dairy case to frozen foods without tipping over the displays on the way).

W. Fine motor skills

- Is the student able to grasp and hold money, write with a pen or pencil, button, snap, etc.

X. Work schedule

- What times are best for the student to work (e.g., a.m., p.m., three times per week; full days; or a combination of the options listed)?

2. DECIDE HOW TO GATHER INFORMATION AND DRAW CONCLUSIONS BASED ON DATA

A. Best practices for determining a process for assessing employment options for individuals with disabilities (25 hours or 80% of the assessment must be in the community)

1. establish a relationship with the student

2. individualize the environment to be assessed

   a. student/consumer selects the environment

   b. assess familiar routines; allow student/consumer to be accompanied by a trusted person

3. gather information from other providers: family, employers, "community support specialists," etc.

4. the best information will be obtained when the student/consumer is supported and reassured

B. Sample Interview Questions for Significant Others

1. What type of job do you think the individual would be interested in?

2. Has the individual worked competitively before? (If yes, then a.)

   a. Was the job perceived as being positive? In what aspects? What could have been done differently to make the situation more positive?

3. How many hours could he/she comfortably work?

4. What, in your opinion, would be the most suitable job for the individual? What have you observed to be that person's strengths/preferences relative to a work situation?

5. What related skills would you like to be addressed in job training?

   a. Communication
   b. Money handling
   c. Transportation, mobility (city busing, electric wheelchair training, tracking)
   d. Self care
   e. Appropriate social behavior

6. What skills would you like to see the individual learn on the job?

7. What recreation/leisure activities are important for the individual to be involved in?

8. Describe the type of work atmosphere you envision for the individual?

9. Explain what you feel are important considerations in developing a job site? (i.e., co-worker relationships, social interactions, physical/medical concerns.)

10. How is the individual currently participating in work activity at home? Identify his/her responsibilities.

    - Table setting
    - Dish washing

- Laundry
- Yard work
- House cleaning
- Bedroom
- Specific duties

11. From your observations, identify strengths in completing tasks. How does he/she enjoy participating in work activities at home?

12. Describe the kind of help/guidance given from significant others in enabling the individual to complete tasks, such as meal preparation, self care (i.e., grooming, bathing, dressing).

13. SSI concerns? (Address SSI issues)

14. Describe the person's level of independence in accessing community environments and his/her involvement in activities. Describe preferences surrounding those activities.

    - Restaurants
    - Grocery shopping
    - Department stores
    - Hair appointments
    - Pharmacy
    - Banking
    - Church
    - School
    - Health club
    - Memberships in specific organizations
    - Social clubs
    - Movie theaters
    - Bowling
    - Night club

15. Describe personal interests/hobbies

    - T.V.
    - Reading
    - Music
    - Records, stereo
    - Board games
    - Bicycling
    - Jogging
    - Gardening

- Other activities, e.g. , going out to eat, movies, etc.
- Sporting events

16. With whom does the individual do these leisure-time activities? Family, neighbors, friends?

(Udvari-Solner, 1986)

3. Functional Evaluation Components

Student's Name:	Reporter's Name:
Medical/Physical Information:	Social/Emotional/Behavioral Information:
Communication:	Natural Support Network/Significant Other:
Meaningful Movements/Need for Assistance:	Adaptations/Assistive Devices:
Related Skills:	Work History:
Work Preferences/Dislikes:	Mobility/Transportation:
Work Endurance/Stamina:	Level of Support Needed:

4. FUNCTIONAL ASSESSMENT DATA GATHERING FORM

Student Name:	**Date:**
Address:	**Phone:**
City:	**DOB:**
Social Sec. #:	**Age:**
Work Permit?:	
Parent/Guardian:	**Phone:**
Address:	
Evaluator:	**Phone:**
Agency:	

Environments Where Information Was Gathered	**Date**

Reports/evaluations Used in Completing Evaluation	**Date**

Siblings	**Addresses**

Family & Cultural Issues

Special Religious Practices:
Special Cultural Practices:
Family's Support of Individual's Work:
Family's Support of Independence-living:
Family's Support of Education & Training:
Role of Significant Others in Person's Life:

Current or Past Involvement with Support Services/Agencies

Agency:	Dates:
Service/Purpose:	Outcome:
Contact Person:	Phone:
Agency:	Dates:
Service/Purpose:	Outcome:
Contact Person:	Phone:
Agency:	Dates:
Service/Purpose:	Outcome:
Contact Person:	Phone:

Agency:	Dates:
Service/Purpose:	Outcome:
Contact Person:	Phone:
Agency:	Dates:
Service/Purpose:	Outcome:
Contact Person:	Phone:

Functional usage of academics (e.g., math, time telling, reading, money, expressive language, written language) Check if skill or problem. If problem, describe & list modifications.

LEARNING/COGNITION		
Skills	Problems	Adaptations/Interventions
☐ Memory ☐:		
☐ Money ☐:		
☐ Spatial ☐:		
☐ Time ☐:		
☐ Writing ☐:		
☐ Reading ☐:		
☐ Math ☐:		
☐ Visual Comprehension ☐:		
☐ Organization ☐:		
☐ Attentiveness ☐:		
☐ Initiative ☐:		
☐ Perseverance ☐:		
☐ Distractibility ☐:		
☐ Anxiety ☐:		
☐ Sequencing ☐:		
☐ Other(s) ☐:		

DAILY LIVING SKILLS INFORMATION		
Skills	Problems	Adaptations/Interventions
☐ Eating ☐:		
Preferences:		Dislikes:
☐ Nutrition ☐:		
Diet Restrictions:		
☐ Recreation ☐:		
Dislikes:		
Preferences:		
☐ Sociability ☐:		
☐ Hygiene ☐:		
☐ Sexuality ☐:		
☐ Housekeeping/Management ☐:		
☐ Parenting ☐:		
☐ Money Management ☐:		
☐ Self-Advocacy ☐:		
☐ Community Involvement ☐:		
☐ Dressing/Clothing ☐:		
☐ Health Care ☐:		
☐ Food Preparation ☐:		
☐ Agency Use ☐:		
☐ Independence ☐:		

Following directions

How simple or complex do directions need to be in order for the student to follow them and complete work tasks (e.g., should directions be one step or three combined steps; written; verbal; signed; examples; pictures; etc).

Behavior

How does the student behave in various environments that are familiar and unfamiliar (i.e., is behavior appropriate)?
What effective support/intervention is provided to the individual when behavior is a problem?
If the student behaves inappropriately, is there an obvious cause, or is he/she communicating a preference, etc.?

Learning Style

Determine the learning modality strength of the individual (e.g., auditory, visual, tactile learner).
Does a concrete or abstract direction make sense to the person?
Can he/she recall skills used earlier (i.e., memory)?
Is the person able to use language receptively and/or expressively?

Individual Preferences

What type of tasks/activities does student like?
What type of tasks/activities does s/he dislike?
What career interests does s/he have?
Where does s/he want to live?
Does s/he want to attend post-secondary education? Where?

Individual strengths

Vocational experiences:
Academic skills:
Athletics:
Social skills:

Nature and intensity of supports needed in past

What type of placement option will the individual do best in (i.e., individual, group):
How much direct support will be necessary—initially, after two months, etc.
What type of support will be best (i.e., learning style, training techniques, etc.)

Work history

Employer	Type of Work	Problems/Successes/Adaptations	Dates

Job seeking skills:
Resume:

Work endurance/stamina

From observation of student in work setting, recommend how many hours the student will be able to work doing specific tasks.		
Task	**Hours**	**Accommodations**

Work related skills

PRIORITIZED DESIRABLE WORKER CHARACTERISTICS [1]

Worker Characteristics	Demon-strates	Instructional Methods/ Adaptations Needed to Improve
1. Good attendance		
a. calls in absent only when ill		
b. calls worksite supervisor in advance of absence to allow staff substitutions		
c. not more than one absence per month		
2. Punctuality		
a. arrives at work early and is ready to work at assigned time		
b. takes breaks at assigned times and departs per schedule		
3. Acceptance of supervision		
a. changes behavior when requested		
b. respects the authority and decision-making role of supervisors		
c. pays attention		
d. resolves differences of opinion in a satisfactory manner		
e. participates in training programs		
f. requests clarification when necessary		
4. Ability to accept criticism gracefully & implement suggestions		
5. Ability to follow/retain verbal directions		
6. Ability to read/carry out simple written directions		
7. Cleans up after self		
8. Ability to attend to task until completed		
a. manages time effectively		
9. Ability to work independently once task is learned		
10. Awareness of safety precautions		
11. Respect of & ability to care for equipment		
12. Ability to adapt to new people/situations		
13. Ability to cooperate/get along		

Worker Characteristics	Demon-strates	Instructional Methods/ Adaptations Needed to Improve
a. participates in work-site social activities (birthday parties, breaks, etc.)		
b. assists co-working with tasks, shares responsibility		
c. shares in co-workers humor		
d. joins in after-work social activities (clubs, parties, bowling teams, etc.)		
14. Ability to measure		
15. Appropriate self-control/frustration management		
16. Ability to ask for assistance		
17. Ability to perform job adequately		
a. uses appropriate techniques		
b. completes all tasks		
18. Confidence in performing task/job		
19. Ability to maintain quality of work/correct own errors		
a. recognizes & analyzes problems with patience		
b. identifies early signs of problems		
c. consults with others, gathers information		
d. considers alternative solutions & their consequences		
20. Ability to maintain adequate productivity/pace		
21. Has realistic job goals		
22. Has knowledge/acceptance of rules		
a. understands employment conditions		
b. understands work schedule		
c. understands personnel procedures		
23. Flexibility for different types of jobs		
24. Willingness to work		
25. Has image of self as a worker, orientation toward work, interest in job		

Worker Characteristics	Demon-strates	Instructional Methods/ Adaptations Needed to Improve
26. Endurance/stamina		
27. Ability to communicate basic needs		
28. Initiative		
a. seeks additional work when tasks are completed		
b. practices skills/requests feedback		
c. inquires about job & related work		
29. Acceptance of responsibility		
a. has provided for child care		
b. keeps work records		
c. prepares, plans & organizes job tasks		
d. maintains physical & mental health		
30. Exhibits good grooming/appropriate personal hygiene		
31. Dresses appropriately		
32. Demonstrates helping behaviors/teamwork		
33. Takes pride in work		
34. Ability to exercise good judgement/problem solving skills		
a. manages personal problems outside work		
b. anticipates consequences of personal actions		
c. exhibits behavior appropriate to the job setting		
35. Willingness to learn		

[1] ADAPTED FROM "A COMPARISON BETWEEN THE PERCEPTIONS OF SPECIAL EDUCATORS AND EMPLOYERS: WHAT FACTORS ARE CRITICAL FOR JOB SUCCESS?", LINDA MCCREA, *CAREER DEVELOPMENT FOR EXCEPTIONAL INDIVIDUALS*, 14:2, 121-130, 1991.

Social skills/interactions

Does the student engage in appropriate social skills and interactions during the assessment/observation process? What are they?
What inappropriate social skills are displayed?
Is support/interaction necessary and/or appropriate and/or effective (e.g., what type, and at what level)?

Communication (receptive and expressive)

Expressive Language	Receptive Language
Characteristics:	Characteristics:
Approximate age level:	Approximate age level:
Alternative communication system used? What?	Alternative communication system used? What?
Need for interpreter?	Need for interpreter?
Accommodations needed:	Accommodations needed:
Need for assessment?	Need for assessment?

Medical/physical status and management (including AODA issues)

Doctor:	Dr's. Phone:
Hospital:	Phone:
Insurance/Medical Card #:	Other Emergency Information:
Responsible Person:	
Phone:	
Allergies:	Procedural Instructions:
☐ Seizures	Describe:
Procedures to follow:	

MEDICATIONS

Name	Purpose	Schedule	Side Effects

DISABILITY INFORMATION

VISION ☐ Blind ☐ Low Vision Acuity_____

Description of Condition(s)	Adaptations/Assistive Devices Required

HEARING ☐ Deaf ☐ Hard of Hearing Loss_____

Description of Condition(s)	Adaptations/Assistive Devices Required

DISABILITY INFORMATION (Con't.)	
PHYSICAL	
☐ Walking Problem Assistance Procedure -	
☐ Stairs Problem Assistance Procedure -	
Wheelchair User ☐ Self Transfer ☐ With Assistance	
Transfer Procedure -	
Prosthetic Devices:	Considerations:
Fine Motor Limitations:	Adaptations:
Health Conditions:	
Physical Conditions:	

Transportation needs

Method	Available	Capable of Using	Accommodations needed (assistive devices, O&M, training,etc)
Car			
Bicycle			
Motorbike			
City bus			
Paratransit System			
Car pool			
Cab			

Current financial information and concerns

Income:	Source:	Concerns:
Debts:	List:	Concerns:
Insurance:	Coverage:	Concerns:
SSI:	Concerns:	
SSDI:	Concerns:	
Welfare:	Concerns:	
Other:		

Past education and training

School:	Dates:	Diploma/Degree:
Favorite Courses:	Grades/successes:	Problems:
School:	Dates:	Diploma/Degree:
Favorite Courses:	Grades/successes:	Problems:

5. WORK STUDY PLACEMENT STRATEGIES AND OPTIONS

A. Stagger – Start

1. Individual placements – Initially may have individual work fewer hours and gradually increase his/her time

2. Cluster site

   a. Start more skilled individuals first
   b. Begin in one area and gradually expand
   c. Heterogeneously group individual students, i.e., not all students with CD at one site.

B. Back-Up Coverage

1. Have teachers and aides available for back-up

2. Schedule coverage for weekly staffings

3. Keep clipboard with critical information on each student

4. Team concept – teacher, aide, employer form a team

6. LEARNING THE JOB AND PERFORMING A TASK ANALYSIS

A. Job orientation

1. Teacher and aide learn job

B. Task analysis/non-disabled person inventory

1. Purpose: Break a job down to component parts to learn steps

2. Task/Discrepancy analysis: Techniques used to compare the performance of an individual with a disability to a non-disabled person. This technique is used to identify instructional strategies, goals/objectives, and possible adaptations (Brown, Shirago, York, Zanella, and Rogan, 1984)

   - Important for identifying:

   a. What individual needs to learn
   b. Possible adaptations
   c. Problem areas

EXAMPLE OF DISCREPANCY ANALYSIS		
Student:	**Date:**	**Reporter:**
Vocational Site: Grocery	**Activity:** Stocking shelves	
Task Analysis **Observable/Measurable**	**+ = acceptable performance of skill** **- = unacceptable performance of skill**	**Instructional strategies/adaptations, Assistive devices**
Non-disabled Person's Performance Inventory	**Student's Performance Inventory**	**Comments**
1. Gets clipboard labeled "Canned & Packaged"	1. – Cannot read the words on clipboard, told what words are.	Put student's name on clipboard to be used.
2. Gets lined paper and puts on board	2. – Forgets what he needs. Teacher – "What do you need?"	Put a picture of lined paper on clipboard.
3. Gets pencil or pen from counter	3. – Forgets what he needs. Teacher – "You need a pencil"	Attach pencil to clipboard.
4. Writes date at top of paper	4. – Cannot write date from memory. Teacher – "The date is ____"	Have student use a date watch.
5. Locates shelf in back for canned goods	5. +	
6. Locates product name on carton	6. +	
7. Writes product name on clipboard	7. +	
8. Repeats #'s 6 & 7 until done with all cartons on shelf	8. +	
9. Locates shelf out front for canned goods.	9. +	
10. Determines if products on list need stocking.	10. +	

EXAMPLE OF DISCREPANCY ANALYSIS (Cont.)		
Task Analysis **Observable/Measurable**	**+ = acceptable performance of skill** **- = unacceptable performance of skill**	**Instructional strategies/adaptations, Assistive devices**
Non-disabled Person Performance Inventory	**Student's Performance Inventory**	**Comments**
11. Repeats #10 for each product	11. +	
12. Gets dolly	12. - Forgets what he needs. Teacher - "You need a dolly"	Put picture of dolly on a sequential list of items needed.
13. Gets pricing gun.	13. - Forgets what he needs. Teacher - "Get pricing gun."	Put picture of pricing gun on sequential list of items needed.
14. Goes to back to shelves	14. + Teacher - "Get pricing gun."	
15. Puts 2 cartons of product that are circled on list on dolly	15. - Doesn't have enough strength to lift. Help lifting cartons.	Teach from whom and how to request assistance.
16. Maneuvers dolly to shelf out front	16. +	
17. Locates product on shelf	17. +	
18. Locates price on carton	18. +	
19. Sets pricing gun a. $ sign b. dollars column c. tens column d. ones column e. checks to see if gun is set correctly f. if gun is set incorrectly, corrects	19. - Forgets the order for setting pricing gun Teacher-Set pricing gun.	Trial problems in setting pricing gun.
20. Puts price on product.	20. +	

EXAMPLE OF DISCREPANCY ANALYSIS (CONT.)		
Task Analysis **Observable/Measurable**	**+ = acceptable performance of skill** **- = unacceptable performance of skill**	**Instructional strategies/adaptations, Assistive devices**
Non-disabled Person Performance Inventory	**Student's Performance Inventory**	**Comments**
21. Places product on shelf a. moves products already on shelf forward b. starts stocking from back c. lines products up straight d. stacks products to proper height e. lines products with other products	21. +	
22. Crosses product out on list	22. +	
23. Puts empty cartons in front	23. +	
24. Repeats #'s 15-23 until all products circled on list are stocked.	24. +	

SAMPLE TASK ANALYSIS/DISCREPANCY ANALYSIS FORM		
Student:	Date:	Reporter:
Vocational Site:	Activities:	
Task Analysis Observable/Measurable	+ = acceptable performance of skill - = unacceptable performance of skill	Instructional strategies/adaptations, Assistive devices
Non-disabled Person's Performance Inventory	Student's Performance Inventory	Comments

7. IDENTIFYING WHAT TO TEACH ON THE IEP

A. Identify performance deficits and areas for training or adaptations under IEP section "present level of educational performance"

B. Develop annual goals directed at specific deficits

C. List priorities of objectives to work on

D. Describe evaluation criteria, procedures and schedule for measuring accomplishment of objectives

8. TEACHING STRATEGIES

A. Attempt to use natural cues as much as possible, avoiding artificial ones; and involve all of the senses

1. match teaching style to the learning style of the student (visual, auditory, tactile)

2. be as concrete as possible in communicating, vs. abstract

3. be aware of the typical learning obstacles of poor discrimination skills, integration of information, generalization, communication, information storage and recall

4. teach tasks in natural environment where they are performed

B. Strategies

1. Provide physical assistance or guidance for a student to perform part or all of a task

   a. Prime assistance – maintained physical assistance
   b. Prompt – initial and/or intermittent assistance
   c. Shadowing – following/shadowing student's movements
   d. Considerations

      1) Most intrusive movement in individual's repertoire
      2) Resistance to touch (tactile defensiveness)
      3) Systematically plan for fading

e. Cautions

1) Use before letting individual try without help
2) May be reinforcing
3) Dependency
4) Easy to over-assist
5) Easy to overlook natural cues

2. Within Stimulus Prompts – Part of the task/materials are exaggerated on some dimension

a. Consideration - Difficult to use

3. Verbal Cues – Verbal directions or requests requiring relatively specific action

a. Direct
b. Indirect
c. Considerations

1) Simple without sounding condescending
2) Age-appropriate
3) Tone and level of voice
4) "Try another way"
5) Pair with another type of assistance
6) Fade from direct to indirect
7) Student needs to understand words being used
8) Hearing unimpaired

4. Visual Cues – cues that student **observes** to assist in completing task

a. Gestures
b. Modeling
c. Pictures/highlighting (also may be considered form of adaptation)
d. Considerations

1) Student's vision must be unimpaired to utilize visual cues effectively.
2) Student must be able to maintain visual attention
3) Pictures/symbols need to be interpreted/understood by student
4) For modeling, student must be able to imitate motor actions
5) Naturally occurring gestures should be used whenever possible
6) When modeling, be aware of any spatial perception difficulties student may have, as well as whether student is right or left handed

C. Methods of presenting entire task

1. Chaining – A procedure that involves teaching a complete sequence of behaviors

   a. Forward Chaining – Teaching the first step, then second, etc.
   b. Backward Chaining – Teaching the last step, then second to last, etc.

2. Isolated Step – Teaching critical steps in task, not necessarily in any order

3. Complete Cycle – Teaching **all** steps in task in the order in which they occur

D. Additional Teaching Strategies and Concerns

1. Successive approximation – Rewarding behaviors that closely resemble desired performance

2. Reinforcement – Provide an individual with positive reinforcement for a correct response

3. Methods for correcting errors

   a. Trial and error
   b. Call attention to natural cues
   c. Provide artificial cues
   d. Reward successive approximations

E. Fading or Reducing Instructional Intervention

1. Reduce assistance provided to student

2. Decrease rate/intensity of positive reinforcement

3. Fading needs to be **planned, systematic, and gradual**

4. Transferring supervision to On-Site Personnel

   a. Teacher initially does total training
   b. Share training strategies with aide and/or co-workers
   c. Explain withdrawal of supervision
   d. Identify co-worker or supervisor in natural position to work with individual
   e. Co-worker may indicate an interest
   f. Maintain regular contact with co-worker and supervisor

9. HOW TO INCLUDE TRANSITION SERVICES IN THE IEP DEVELOPMENT

A. Required content of an IEP:

1. A statement of the child's present levels of educational performance

2. A statement of annual goals

3. Short-term instructional objectives to meet goals

4. A statement of the specific educational services to be provided

5. A statement of the related services to be provided:

   a. transportation
   b. developmental, corrective and other supportive services
   c. speech pathology
   d. audiology
   e. psychological services
   f. physical therapy
   g. occupational therapy
   h. recreation (including therapeutic recreation)
   i. early identification and assessment of disabilities
   j. counseling services
   k. medical services for diagnosis or evaluation
   l. social work services
   m. rehabilitation counseling services
   n. parent counseling and training

6. Extent to which child will be able to participate in regular educational programs

7. A statement of the needed transition services to students beginning no later than age 16

   a. when appropriate for the individual, a statement of the interagency responsibilities or linkages (or both) before the student leaves the school setting.

   b. if a participating agency other than the district fails to provide agreed upon services, the IEP team must reconvene and identify alternative strategies to meet the transition objectives

8. The projected date for initiation of services

9. The anticipated duration of services

10. Appropriate **objective evaluation criteria** to determine at least annually if instructional objectives are being achieved

11. Appropriate **evaluation procedures** to determine at least annually if instructional objectives are being achieved

12. Appropriate **evaluation schedules** to determine at least annually if instructional objectives are being achieved

B. What constitutes the "transition services" which must be addressed in the IEP?

1. a coordinated set of activities for a student, designed within an outcome-oriented process

2. the process promotes movement from school to:

   a. post-school activities
   b. post-secondary education
   c. vocational training
   d. integrated employment (including supported employment)
   e. continuing and adult education
   f. adult services
   g. independent living
   h. community participation.

3. the coordinated set of activities must

   a. be based upon the individual student's needs
   b. take into account the student's preferences and interests
   c. include instruction
   d. include community experiences
   e. include the development of employment objectives
   f. include the development of other post-school adult living objectives
   g. include, when appropriate, acquisition of daily living skills
   h. include, when appropriate, functional vocational evaluation

C. What are examples of appropriate transition curriculum domains from which to develop a "coordinated set of activities for a student?"

1. community participation skills

2. personal and daily living skills

3. recreation and leisure skills

4. vocational and career skills

5. post-secondary education skills

D. How is work experience in integrated settings included on the IEP?

1. All work experience for all students must comply with state and federal child labor laws.

   a. students must be aged 16
   b. students must have a work permit
   c. parents must approve

2. All work/study programs must comply with the Compulsory School Attendance Law. s.118.15

   a. work experience during the school day must

      1) lead to high school graduation (credits must be awarded)
      2) be supervised by licensed teachers
      3) be paired with instruction

   b. transportation between work and school, if necessary, must be provided at no cost to the student or parent

3. All work/study programs for all students must comply with Wisconsin's Education for Employment Standard.

   a. must include the practical application of basic skills
   b. must include career exploration which is not sex-role stereotyped
   c. must include school supervised work experience
   d. must include employability skills instruction
   e. must include the study of practical economics
   f. must provide grades 9-12 accessibility to market-based vocational curriculum
   g. must be integrated with other programs in the school and with other agencies in the district

4. The IEP committee must justify "removal from the regular education environment" when designing a community based work experience for a student

5. An "annual goal" must address the specific vocational or career skill which is

to be achieved through the work experience

6. The "present levels of educational performance" related to the vocational skill goal must be documented and must demonstrate the "individual student's needs" for services in that area. This could be accomplished through a functional vocational evaluation, a curriculum based vocational evaluation, a vocational preference evaluation, but should be quantifiable and replicable. In addition, for 16 year olds and above, this component of the IEP could be used to report the student's "preferences and interests" in the vocational/career area. If it is a continuation goal from the previous IEP, it could be extrapolated from the previous IEPs short-term objectives' evaluation outcomes.

7. The IEP committee must list short-term objectives, ideally sequential, which will enable the student to accomplish the vocational skill goal. The objectives must allude to the work experience, what instruction is being provided, and what employment outcome is desired. The instructional objectives must be stated in such a way as their accomplishment can be measured.

8. The IEP committee must develop an evaluation plan for every objective, which states what the criterion of success is, how it will be measured and when it will be measured. ("objective evaluation criteria, evaluation procedures and evaluation schedule")

9. The IEP committee must state what specific educational services will be provided to meet this annual vocational/work goal. Examples could be:

    a. Job finding and placement by the work/study coordinator in the district

    b. Securing a job training program through the Private Industry Council and local Job Training Partnership Act coordinator

    c. Providing vocational coursework, in the district or the local WTCS, which relates to the student's job placement

10. The IEP committee must state the related services the student will need in order to benefit from the special education program. Examples of related services which might be necessary to reach the vocational goal are:

    a. Under "rehabilitation counseling services," group instruction, provided by the DVR counselor, on available community jobs and DVR services which can assist students in accessing and keeping them

    b. Under "parent counseling and training," inservices and worksite

visitations for reluctant parents to demonstrate the feasibility of community integration and employment for their child with disabilities.

c. Under "transportation," providing cab fare or bus passes for the student to get to the community work site.

d. Under "developmental, corrective and other supportive services," securing a special minimum wage license from DILHR for the student

E. How does an IEP committee go about their task of stating "needed transition services, and interagency responsibilities or linkages?"

1. The IEP committee must state the transition services the student needs. Examples of "coordinated sets of activities" in this area of vocational training will require IEP committee participation from the respective vocational experts (vocational instructor, LVEC, DVI, DVR, WTCS counselor, etc.) and are:

   a. enrollment in the district's Tech Prep program (coordinated between the WTCS and district)

   b. on-the-job training supervised by DVR and paired with instruction from the special education program

   c. enrollment in a district's cooperative business program with adaptations per the IEP, linkage support from the designated vocational instructor (DVI) and special instruction from the special education program

2. The IEP committee, when appropriate for the individual student, must state "interagency responsibilities or linkages (or both) before the student leaves the school setting." In order to make a statement of another agency's responsibilities, the IEP committee must include a representative of that agency who can make such commitments. How other agencies participate in the IEP development needs to be established by administrative agreements among those agencies and the district. Linkages can be addressed on the IEP by statements indicating that referrals will be made on specific dates to appropriate agencies, consultation with involved agencies will occur on a periodic basis, etc. Such statements could be made under IEP headings of "objectives, related services or action taken." Examples of interagency responsibilities and linkages in the area of vocational skills are:

   a. IEP referral to a county mental health board of a 16 year old who is "not expected to be enrolled in an educational program 2 years from the date of the report and may require services" of the Community Support Program from that board. ss. 115.85(4)

b. Commitment from the WTCS transition specialist to assist the EEN student who is enrolled in the high school and taking a vocational class at the WTCS part-time.

c. Commitment from the DVR counselor to assess the EEN student to determine eligibility for DVR services.

d. Commitment from the Developmental Disabilities Office to provide legal services to the student and insure that Social Security benefits are in place.

10. MONITORING PROGRESS - EVALUATION

A. Importance of data collection

1. Visual indicator of performance and progress

2. Provides ongoing assessment information to determine accomplishment of IEP objectives and/or need to revise

3. Helps monitor special-minimum wage

4. Helps analyze effectiveness of teaching strategies; appropriateness of activity

5. Required on IEP in evaluation section

6. If IEP comprehensively and conscientiously developed and updated, it is the ideal communication instrument on the student's skills and weaknesses over his/her entire school experience for many agencies' information needs.

B. When to record data

1. IEP committee decision – Data may be taken weekly, biweekly, beginning/end of month (under "schedule" of evaluation on IEP)

C. Cautions

1. Why are you taking data? Is it being used for program monitoring, changes, accountability—or sitting uselessly in a file?

2. Process needs to be consistent across agency personnel and results communicated to all involved-including student!

3. Sharing data across agencies always requires adult student or parent permission.

MULTI-AGENCY PLANNING & ASSESSMENT

STAGE V

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MULTI-AGENCY PLANNING AND ASSESSMENT IN THE IEP

The IDEA's transition process holds school districts responsible to initiate multi-agency transition linkages and coordination through the IEP planning team prior to school exit by

> "inviting a representative of any other agency that is likely to be responsible for providing or paying for transition services" and if they do not attend, the district must "take other steps to obtain the participation of the other agency in the planning of any transition services."

The intent of this regulation is "to address shared financial and planning responsibilities for providing transition services" (O'Leary, E., 1992) among community agencies and to insure that one agency (school) functions as the case manager for the initiation of transition services. Thus, the IEP should be including present and future commitments of services and/or funding by participating agencies. The earlier this planning occurs, the less duplication of services will occur, the earlier the services will be provided, and hopefully, the better the post-school outcomes will be for the students.

When the IEP committee believes the district has exhausted its expertise in the vocational evaluation and services for a youth with disabilities, it must invite other likely agencies to the IEP committee to assist in the planning and assessment of the student's program. Some typical agencies who should be participating in the IEP process include the Wisconsin Technical College System district transition specialists, a DVR counselor, the county mental health and developmental disabilities counselor.

> "If a participating agency fails to provide agreed upon transition services contained in the IEP of a student with a disability, the public agency responsible for the student's education shall, as soon as possible, initiate a meeting for the purpose of identifying alternative strategies to meet the transition objectives, and if necessary, revising the student's IEP. Nothing in this part relieves any participating agency, including a State vocational rehabilitation agency, of the responsibility to provide or pay for any transition service that the agency would otherwise provide to students with disabilities who meet the eligibility criteria of that agency." 34 CFR 300.347

Systematic, consistent and effective multi-agency participation in the IEP process is only achieved through the establishment of administrative level interagency committees and agreements. The comment section of the regulations makes it clear that the task of eliciting community agency participation is the responsibility of school administration, not teachers. Whenever community agency representatives are invited to the IEP meeting, parents must be notified in the IEP notice and must also be notified that their child will be invited. Many agencies which serve individuals with disabilities are required by legislation to develop service plans for their clients. The Division of Vocational Rehabilitation, pursuant to the Rehabilitation Act, must develop an individualized written rehabilitation program (IWRP); the developmental disabilities agency must develop an

individual services plan (ISP) under the Social Security Act; the Job Training Partnership Act (JTPA) program must develop an employment training plan; and the mental health agency must write an individual treatment plan (ITP). If the IEP were coordinated with these varied human service plans, true transition programming and cohesive and comprehensive service delivery would be the result.

BIBLIOGRAPHY

Anderson, W., Beckett, C., Chitwood, S. & Hayden, D. (1984). Next Steps: Planning for Employment. Parent Educational Training Center, Alexandria, VA.

Baumgart, D. & Anderson, J. (1987). Secondary Transition and Employment Project. (STEP). University of Idaho, Moscow, ID.

Bissonnette-Lamandella, D. (1978). Paths to Entering the Job Market. Los Angeles County Office of Education, Milt Wright Associates, Chatsworth, CA.

Brolin, D.E. (1982). Vocational Preparation of Persons with Handicaps. Charles E. Merrill Publishing Co., Columbus, OH.

Cobb, R.B. & Larkin, D. (1985). "Assessment and Placement of Handicapped Pupils into Secondary Vocational Education Programs." Focus on Exceptional Children. 17:7.

Cobb, R.B. (1983). "A Curriculum-Based Approach to Vocational Assessment." Teaching Exceptional Children.

Gassman, R. & Deutsch, N. (1990). Increasing Options Through Life/Work Planning. Wisconsin Department of Public Instruction, Madison, WI.

Hartley, N. & Lehman, J. (1987). "Vocational Assessment - A Model." Presentation at Region V NAVESNP Conference, Feb. 19-20, 1987.

Jew, W. & Tony, R. (1976). Janus Job Planner. Janus Book Publishers, Hayward, CA.

Kimbrell, G. (1986). "Career Interest Survey." The World of Work. Glencoe Publishing Company, Bloomington, IL.

Kimbrell, G. & Vineyard, B. (1985). Entering the World of Work. Bennett & McKnight Publishing Co., Bloomington, IL.

Lombard, R., Larson, K., & Westphal, S. (1993). "Validation of Vocational Assessment Services for Special Populations in Tech Prep: A Model for Translating the Perkins Assurances into Practice." The Journal for Vocational and Special Needs Education. Fall, 1993, 16:14-22.

Meers, G.D. (1980). Handbook of Special Vocational Needs Education. Aspen Publication, Rockville, MD.

Miller, S.R. & Schloss, P.J. (1982). Career-Vocational Education for Handicapped Youth. Aspen Publication, Rockville, MD.

Nadolsky, J. (1973). Vocational Evaluation of the Disadvantaged. Auburn University, School of Education, Auburn, AL.

Nadolsky, J. (1972). Development of a Model for Vocational Evaluation of the Disadvantaged. Auburn University, School of Education, Auburn, AL.

Nadolsky, J. (1971). "Development of a Model for Vocational Evaluation of the Disadvantaged." Interim Report. Auburn University, Auburn, AL.

Peterson, M. (1985). "Models of Vocational Assessment of Handicapped Students." Career Development for Exceptional Individuals. Fall, 1985.

Peterson, M. (1985). Vocational Assessment for Vocational Education: Competency Analysis and Work Sample Development. VOC-AIM, Starkville, MS.

Peterson, M. (1985). Vocational Assessment of Special Students: A Guide. VOC-AIM, Starkville, MS.

Peterson, M. (1985). Vocational Assessment of Special Students: A Procedural Manual. VOC-AIM, Starkville, MS.

Phelps, L.A. & McCarty, T. (1984). "Student Assessment Practices." Career Development for Exceptional Individuals. Spring, 1984.

Poole, V.& Burke, P. (1988) Education for Employment: A Resource and Planning Guide. Wisconsin Department of Public Instruction, Madison, WI.

Sitlington, P. (1979). "Vocational Assessment and Training of the Handicapped." Focus on Exceptional Children. 12:4.

Stodden, R.A. (Ed.) (1981). "Vocational Assessment." (Policy Paper Series: Document 6.) Champaign Leadership Training Institute/Vocational & Special Education, University of Illinois, Champaign, IL.

Treichel, J.M. (Ed.) (1982). "Vocational Education for the Handicapped: Perspectives on Vocational Assessment." (Personnel Development Series: Document 7.) Champaign Leadership Training Institute/Vocational & Special Education, University of Illinois, Champaign, IL.

Warner, C. (1985). Work Experience: A Resource Manual. Arizona Department of Education - Special Education Section.

Wircenski, J. (1982). Employability Skills for the Special Needs Learner. Aspen Publication, Rockville, MD.

APPENDIX

Additional Examples of Functional Assessment Data Gathering Forms/Formats/Lists

DUNN COUNTY TRANSITION COUNCIL

FUNCTIONAL VOCATIONAL ASSESSMENT
COVER SHEET

Date _____

Name _____ D.O.B. _____ Age _____

Address _____ Telephone _____

_____ Anticipated Date of School Exit _____

Social Security # _____ Pr. Handicapping Cond. _____

Most Recent M-Team Date _____ Sec. Handicapping Cond. _____

Parent/Guardian (if appropriate) _____

Address _____

Telephone _____

Assessments Completed (High School and Agency Assessments Completed)

Instrument/Type	Date	Where Filed

Current Agency Enrollment

		Contact Person
☐	CIL-WW	_____
☐	County Human Services	_____
☐	DVR	_____
☐	Indianhead Enterprises	_____
☐	Lutheran Social Services	_____
☐	PIC	_____
☐	Post-secondary institution	_____
☐	SSI/SSDI	_____
☐	Other	_____

Acquired Vocational Skills

Expressed and/or Tested Vocational Interests

Extracurricular Activities, Clubs, Groups, Etc.

Work History

Job Title 1 _____
Wage _____
Duties _____
_____
Employer _____
How Job Secured _____
_____
Length Employed _____
Subsidized Employment _____
_____
Reason for Leaving _____
_____

Job Title 2 _____
Wage _____
Duties _____
_____
Employer _____
How Job Secured _____
_____
Length Employed _____
Subsidized Employment _____
_____
Reason for Leaving _____
_____

FUNCTIONAL VOCATIONAL ASSESSMENT

MOBILITY

	Yes	No	Disability Related
1. Requires assistance from others to travel in community.	☐	☐	☐
2. Has physical, mental or emotional limitations that significantly reduce range of travel.	☐	☐	☐
3. Uses public transportation if available.	☐	☐	☐
4. Possesses valid driver's license.	☐	☐	☐
5. Can follow route to familiar locations. (example: work, store)	☐	☐	☐
6. Can determine route to new location.	☐	☐	☐
7. Initiates plans to and follows route to new location.	☐	☐	☐

8. Primary mode and provider of transportation - _____

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

COMMUNICATION

	Yes	No	Disability Related
1. Can explain how he/she learns best.	☐	☐	☐
2. Speech is a viable form of communication.	☐	☐	☐
3. Can hear environmental sounds as it relates to safety and reacts appropriately.	☐	☐	☐
4. Can hear spoken language.	☐	☐	☐
5. Can understand spoken language.	☐	☐	☐
6. Can follow verbal and written directions.	☐	☐	☐

Medical Information

Name of Physician _____

Address _____

Telephone _____ Hospital _____

Recurring Health Conditions _____

_____

_____

Chronic Health Conditions _____

_____

_____

Does the student have any allergies? _____ no _____ yes

If yes, describe what they are and procedural instructions for dealing with reactions: _____

_____

_____

Does the student have a seizure condition? _____ no _____ yes

If yes, describe the seizures and procedural instructions for supporting the student through them: _

_____

_____

Is the student on any type of medication? _____ no _____ yes

If yes, please provide the following information:

Type of Medication	Prescribed for	Dosage (amount & time)	Side Effects

Who sets up all medical appointments? _____

_____

Diet

Does the consumer have dietary restrictions? If so, describe: _____

_____

_____

(FVACover)

SELF-CARE (CONT.)

	Yes	No	Disability Related
2. Implements good health practices in the following areas:			
balanced diet	☐	☐	☐
exercise	☐	☐	☐
medical checkups	☐	☐	☐
dental checkups	☐	☐	☐
3. Needs personal assistance or accommodations to perform activities of daily living such as:			
eating	☐	☐	☐
toileting	☐	☐	☐
grooming	☐	☐	☐
dressing	☐	☐	☐
4. Needs personal assistance or accommodations to perform activities of daily living such as:			
cooking	☐	☐	☐
shopping	☐	☐	☐
washing	☐	☐	☐
housekeeping	☐	☐	☐
money management	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

SELF DIRECTION	Yes	No	Disability Related
1. Prepares and follows own schedule.	☐	☐	☐
2. Follows a schedule if prepared by another individual.	☐	☐	☐
3. Will need support to arrange and complete interviews with DVR counselor or other agency staff.	☐	☐	☐

COMMUNICATION (CONT.)

	Yes	No	Disability Related
7. Can follow directions from simple to complex.	☐	☐	☐
8. Exhibits short or long-term memory deficits.	☐	☐	☐
9. Can use telephone as means of communication.	☐	☐	☐
Reading			
1. Can read, understand and interpret a single sentence, statement, question.	☐	☐	☐
2. Can read, understand and interpret a paragraph length statement/question.	☐	☐	☐
3. Can read, understand job application.	☐	☐	☐
4. Can read and understand newspaper articles.	☐	☐	☐
Writing			
1. Can print or write legibly.	☐	☐	☐
2. Complete application form.	☐	☐	☐
3. Can write in a confined space, i.e., application form, time card, etc.	☐	☐	☐
4. Can write a message accurately.	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

SELF-CARE

	Yes	No	Disability Related
1. Personal grooming and hygiene adequate for most jobs.	☐	☐	☐

INTERPERSONAL SKILLS/ACCEPTANCE (CONT.)

	Yes	No	Disability Related
7. Able to establish/maintain relationships with others.	☐	☐	☐
8. Anticipates consequences of personal actions.	☐	☐	☐
9. Experiences social rejection due to disfigurement or bizarre behavior.	☐	☐	☐
10. Adjusts easily to new situations and changes.	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

WORK TOLERANCE

	Yes	No	Disability Related
1. Physically and emotionally able to maintain an 8-hour day.	☐	☐	☐
2. Physically and emotionally able to maintain a 4-hour day.	☐	☐	☐
3. Can stand for extended periods of time.	☐	☐	☐
4. Able to sit for extended periods of time.	☐	☐	☐
5. Tolerate extreme cold.	☐	☐	☐
6. Tolerate extreme heat.	☐	☐	☐
7. Can tolerate environmental extremes of dust, noise and fumes.	☐	☐	☐
8. Frequent absences.	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

SELF DIRECTION (CONT.)

	Yes	No	Disability Related
4. Can identify tasks that need to be done; takes actions to initiate.	☐	☐	☐
5. Demonstrates an understanding of the consequences of behavior.	☐	☐	☐
6. Can adjust from one task to another.	☐	☐	☐
7. Advocates for self.	☐	☐	☐
8. Actively participates in setting goals.	☐	☐	☐
9. Follows through with established goals.	☐	☐	☐
10. Sets realistic job goals.	☐	☐	☐
11. Motivated to work.	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

INTERPERSONAL SKILLS/ACCEPTANCE

	Yes	No	Disability Related
1. Can express concerns in acceptable manner.	☐	☐	☐
2. Interacts with others appropriately in work situations.	☐	☐	☐
3. Can work with minimal supervision for a period of 2-3 hours.	☐	☐	☐
4. Are interpersonal skills acceptable during lunch and breaks.	☐	☐	☐
5. Can accept constructive criticism.	☐	☐	☐
6. Deals with personal issues outside work.	☐	☐	☐

WORK SKILLS (CONT.)

	Yes	No	Disability Related
Math			
1. Can make correct change for purchases under $20.00.	☐	☐	☐
2. Counts to 100 accurately.	☐	☐	☐
3. Ability to add, subtract, multiply and divide whole numbers with or without a calculator.	☐	☐	☐

ACCOMMODATIONS OR COMMENTS: _____

_____

_____

ACCOMMODATIONS OR MODIFICATIONS

The following accommodations:

	Have Been Tried	Successful	Not Successful	Recommended	Currently Using
1. Extended time for completion of tasks.	☐	☐	☐	☐	☐
2. Alternative testing.	☐	☐	☐	☐	☐
3. Alternative media.	☐	☐	☐	☐	☐
4. Specialized tutoring.	☐	☐	☐	☐	☐
5. Interpreter services.	☐	☐	☐	☐	☐

WORK SKILLS

Pre-Employment	Yes	No	Disability Related
1. Can use telephone directory to obtain addresses and phone numbers of potential employers, social service agencies and job leads.	☐	☐	☐
2. Will need assistance and encouragement to arrange and complete successful job interviews.	☐	☐	☐
3. Can accurately describe duties performed on jobs either verbally or written.	☐	☐	☐
4. Inquires about job or related work.	☐	☐	☐

Employment			
1. Determines appropriate time to arrive at work or other scheduled events and follows through.	☐	☐	☐
2. Demonstrated decision making/problem solving and judgment skills.	☐	☐	☐
3. Asks for clarification when necessary.	☐	☐	☐
4. Accepts changes in work assignment.	☐	☐	☐
5. Can identify and follow safety procedures.	☐	☐	☐
6. Seeks additional work when tasks are completed.	☐	☐	☐
7. Completes all tasks assigned.	☐	☐	☐
8. Ability to maintain quality of work - correct own errors.	☐	☐	☐
9. Ability to maintain adequate productivity/pace.	☐	☐	☐
10. Adjusts work speed to work demand.	☐	☐	☐

FUNCTIONAL COMMUNITY SERVICES PROFILE

NAME: _____ **DATE:** _____
TEACHER: _____ **SCHOOL DISTRICT:** _____

PLEASE COMPLETE ONLY AREAS OF CONCERN, INCLUDING "DESCRIBE" SECTION

MOBILITY

DEFINITION: Mobility means the physical, cognitive and psychological ability to move from place to place inside and outside the home.

Does the student require help from others to move about the community? Describe:

Does the student use public transportation? Describe types used:

Does the student have the ability to obtain a driver's license?

Can the student determine routes to new locations without assistance?

Can the student follow directions to a new location?

Other (Describe):

COMMUNICATION

DEFINITION: Communication means the physical, cognitive and psychological ability to exchange information effectively.

Does the student have learning or memory deficits? Describe:

Does the student require adaptations or accommodations to hear, speak, read or understand language? Describe:

Does the student distort, misunderstand or not perceive communication as intended by communicator? (ie. non-verbal, subtle cues, understand humor) Describe:

Developed by CESA #1 Programs for Transition project and the DVR Northwest office. Questions regarding this form should be directed to James P. Heiden, CESA #1, (414) 546-3000; Diane Coley or Stephanie Perla, DVR Northwest, (414) 438-4860.

ACCOMMODATIONS OR MODIFICATIONS (CONT.)

The following accommodations:

	Have Been Tried	Successful	Not Successful	Recommended	Currently Using
6. Environmental accommodations.	☐	☐	☐	☐	☐
7. Assistive devices.	☐	☐	☐	☐	☐

Further recommendations or comments: _____

_____

_____

8. Functional Vocational Assessment completed by:

_____ _____

Name Date

(FuncAsmt)

Does the student have the ability to understand cause and effect? Is the student aware of the consequences of their behavior and the effect of their behavior on others?
Describe:

Does the student require frequent supervision, have difficulty changing tasks or have difficulty maintaining involvement on a task?
Describe:

Does the student have the ability to evaluate their own quantity and quality of work?
Describe:

Is the student able to acknowledge when he/she does not understand instructions and is able to request assistance as needed?
Describe:

Is the student able to prioritize and complete assigned activities?
Describe:

Can the student independently access adult community service providers?
Describe:

Other (Describe):

INTERPERSONAL SKILLS OR ACCEPTANCE

DEFINITION: Interpersonal acceptance mean the physical, cognitive and psychological ability to establish and maintain personal, family or community relationships.

Does student exhibit behaviors or conditions which detract from the performance or acceptance by others?
Describe:

Has the student experienced problems interpreting or responding to the behavior and communication of co-workers and supervisors?
Describe:

Does the student interact appropriately when meeting new people?
Describe:

Other (Describe):

Does the student possess academic deficits in oral and/or written communication? Describe:

Approximate functional reading level:_____ __ Describe:_____
Approximate functional math level:_____ Describe:_____
Approximate functional writing level:_____Describe:_____
Approximate functional spelling level:_____Describe:_____

Other (Describe):

SELF-CARE

DEFINITION: Self care means the physical, cognitive and psychological ability to perform activities of daily living including: eating, toileting, grooming, dressing, cooking, shopping, washing, housekeeping, money management and health and safety needs.

Does student require adaptations or accommodations not typically made for others to perform acitivies of daily living?
Describe:

Describe student's money management skills. (ie. Making change, preparing a budget and understanding the value of money)

Describe student's time management skills. (ie. Meets deadlines for assignments, punctual to class and a worksite)

Does the student practice good grooming and hygiene skills?.
Describe:

Other (Describe):

SELF DIRECTION

DEFINITION: Self direction means the physical, cognitive and psychological ability to independently plan, initiate, organize, make decisions and carry out daily life activities after self-care needs have been met.

Does the student have difficulty in planning, initiating, organizing and/or carrying through on tasks?
Describe:

Is learning limited to routine and repetitive tasks?
Describe:

Does student have difficulty in understanding, recalling instructions or task sequencing?
Describe:

If work is completed ahead of schedule, does student use unassigned work time appropriately. Does student utilize time effectively?
Describe:

Does student work cooperatively in a group of three or more?
Describe:

Does student work independently?
Describe:

Does student handle criticism from fellow workers/peers appropriately?
Describe:

Other (Describe):

3/29/95

Developed by CESA #1 Programs for Transition project and the DVR Northwest office. Questions regarding this form should be directed to James P. Heiden, CESA #1, (414) 546-3000; Diane Coley or Stephanie Perla, DVR Northwest, (414) 438-4860.

WORK TOLERANCE

DEFINITION: Work tolerance means the physical, cognitive and psychological capacity to meet the demands of the workplace regardless of the work skills already possessed by an individual.

Are there any physical restrictions to activities? (Deficits in strength, voluntary motions, reaching, grasping or manipulation, etc.)
Describe:

Is the student taking medication? Are there any side effects?
Describe:

Are there any environmental or psychological factors which should be avoided?
Describe:

Does the student have difficulty tolerating work schedules which would be expected of other student/workers?
Describe:

Are there any other concerns regarding work tolerance?
Describe:

Other (Describe):

WORK SKILLS OR WORK HISTORY

DEFINITION: Work skills or work history means the physical, cognitive and psychological ability to demonstrate work skills or work experience necessary to obtain and maintain appropriate employment.

Are accommodations needed in a classroom or community setting?
Describe:

Is supervision required for completion of tasks?
Describe:

Does student lack transferable skills from the classroom to community?
Describe:

12. Summarize this individual's reading skills. Be specific in relation to the individual's career goals and expected achievement in postsecondary education and/or job performance.

Math

13. Counts to 100 accurately.
    ❑ Yes ❑ No

14. Performs the following accurately (99-100% of the time):
    ❑ Yes ❑ No Adding whole numbers
    ❑ Yes ❑ No Adding fractions
    ❑ Yes ❑ No Subtracting whole numbers
    ❑ Yes ❑ No Subtracting fractions
    ❑ Yes ❑ No Uses a pocket calculator correctly

15. Can make correct change for purchases under $20.
    ❑ Yes ❑ No

16. Summarize this individual's math skills. Be specific in relation to the individual's career goals and expected achievement in postsecondary education and/or job performance.

Writing

17. **Accurately** writes his/her:
    ❑ Yes ❑ No Social security number
    ❑ Yes ❑ No Phone number
    ❑ Yes ❑ No Complete mailing address

18. Can correctly fill in an application for a job, a school, or a training program.
    ❑ Yes ❑ No

19. Has prepared a complete resume.
    ❑ Yes ❑ No

Functional Skills Inventory

Name	Date
Rater	Phone
Address	

Independence

1. Will need parental support to arrange and complete interviews with Department of Health and Social Services' Division of Vocational Rehabilitation counselor or other agency staff.
   ❑ Yes ❑ No
2. Follows a schedule if someone else prepares it.
   ❑ Yes ❑ No
3. Prepares and follows own schedule.
   ❑ Yes ❑ No
4. Can tell time to the minute.
   ❑ Yes ❑ No
5. Meets new people easily.
   ❑ Yes ❑ No
6. Accurately states his/her:
   ❑ Yes ❑ No Social security number
   ❑ Yes ❑ No Phone number
   ❑ Yes ❑ No Complete mailing address

Reading

7. Can read, understand, and interpret a single sentence, statement, or question.
   ❑ Yes ❑ No
8. Can read, understand, and interpret a paragraph-length statement or question.
   ❑ Yes ❑ No
9. Can read, understand, and carry out instructions that are:
   ❑ Yes ❑ No Typed
   ❑ Yes ❑ No Handwritten
   ❑ Yes ❑ No In list form
   ❑ Yes ❑ No In paragraph form
10. Can read and understand a job application.
    ❑ Yes ❑ No
11. Can read and understand newspaper articles.
    ❑ Yes ❑ No

24. Implements good health practices:

❑ Yes	❑ No	Balanced diet
❑ Yes	❑ No	Exercise
❑ Yes	❑ No	Medical checkups
❑ Yes	❑ No	Dental checkups

25. Missed more than four days of school per year.

❑ Yes ❑ No

26. If yes, why?

Travel

27. Uses public transportation.

❑ Yes ❑ No

If yes, describe type(s) used.

28. Possesses valid driver's license.

❑ Yes ❑ No

29. Knows route to:

❑ Yes	❑ No	Place of work
❑ Yes	❑ No	DVR office
❑ Yes	❑ No	Grocery store
❑ Yes	❑ No	Bank
❑ Yes	❑ No	Laundromat

30. Can determine routes to new locations without assistance.

❑ Yes ❑ No

31. Can follow verbal directions to a new location.

❑ Yes ❑ No

20. Summarize this individual's writing skills. Be specific in relation to the individual's career goals and expected achievement in postsecondary education and/or job performance.

Physical Coordination / Orientation

21. Has this person been observed to have any physical coordination problems?

❑ Yes ❑ No

Describe how this might limit the individual's employment possibilities.

22. Has this person been observed to have any directionality problems?

❑ Yes ❑ No problem ❑ Not observed

The problems are:

Health / Hygiene

23. Practices good grooming and hygiene.

❑ Yes ❑ No

45. Works cooperatively in a group of three or more.
    ❑ Yes ❑ No
46. Works appropriately alone.
    ❑ Yes ❑ No
47. Behaves appropriately during work breaks.
    ❑ Yes ❑ No
48. Behaves appropriately during lunch breaks.
    ❑ Yes ❑ No
49. Handles criticism from fellow workers appropriately.
    ❑ Yes ❑ No
50. List the work history of this individual and state how he or she obtained these jobs.

    Jobs performed in the school setting:

    Jobs performed in the community:

51. Can accurately describe **verbally** what he or she did on these jobs.
    ❑ Yes ❑ No
52. Can accurately describe **in writing** what he or she did on these jobs (for example, when asked to fill out a job application).
    ❑ Yes ❑ No

Other Skills

53. Understands and follows three-step verbal directions.
    ❑ Yes ❑ No
54. Can explain how he or she learns best.
    ❑ Yes ❑ No
55. List other skills that this individual has (for example, musical, athletic).

32. Can follow written directions to a new location.
❑ Yes ❑ No

33. Must be "walked through" route to a new location in order to learn it.
❑ Yes ❑ No

Employment

34. Can use telephone directory to obtain addresses and phone numbers of potential employers and social service agencies.
❑ Yes ❑ No

35. Will need assistance and encouragement to arrange and complete successful job interviews.
❑ Yes ❑ No

36. Determines appropriate time to arrive at work or other scheduled events (not too early nor too late).
❑ Yes ❑ No

37. Once at work, finds own work station.
❑ Yes ❑ No

38. Asks questions of supervisor if he or she does not understand work assignment.
❑ Yes ❑ No

39. How does person react to changes in work assignment?

40. Learns and follows safety procedures.
❑ Yes ❑ No

41. Can read and understand technical manuals.
❑ Yes ❑ No

42. Understands that work can result in earning money.
❑ Yes ❑ No

43. What does this individual do if assigned work is finished?

44. If work is completed ahead of schedule, uses unassigned work time appropriately.
❑ Yes ❑ No

Personal Statement

63. Attach a paragraph written by this individual that tells: a) why he or she is seeking agency assistance, b) his or her career objectives, and c) why he or she feels that he or she will be successful in that career.

Source: Wisconsin Division of Vocational Rehabilitation counselors, WI Association of Children and Adults with Learning Disabilities staff, and Center on Education and Work (University of Wisconsin-Madison) staff as part of the project "Best Practices: Successful Vocational Rehabilitation of Persons with Learning Disabilities," December 1988.

Learning Style / Strategies

56. Needs extra time to answer questions

❑ Yes ❑ No Verbally
❑ Yes ❑ No In writing

57. Gets distracted by sounds (for example, people talking).

❑ Yes ❑ No

58. Gets distracted by visual stimuli not related to the task at hand (for example, people, birds).

❑ Yes ❑ No

59. What approaches work best if this person needs to learn or practice a new skill that involves eye, hand, or body coordination.

60. What approaches work best when teaching this person information that he or she does not know?

61. What approaches do not work well or at all in attempting to teach this person something he or she does not know?

62. Describe this individual's attitudes and abilities in regard to his or her career choice. Include work habits, initiative, teacher comments, and so forth.

CATEGORY: MONEY MANAGEMENT AND CONSUMER AWARENESS

MINIMAL

_____ Knows values of coins and currency.

_____ Can make a transaction at a local store and count change.

_____ Has an understanding of the difference between "luxuries" and "necessities" in food, transportation, clothing, housing, etc.

_____ Understands the difference between "sale price" and "regular price".

_____ Knows how to clip and use coupons.

INTERMEDIATE

_____ Can open a checking or saving account.

_____ Can write checks/make withdrawals and make deposits.

_____ Can record banking transactions (either checking or savings.

_____ Can budget allowance to last for a week. (Shows some understanding of the concept of saving.)

_____ Understands the difference between gross wage and take home pay.

_____ Can use a calculator to add, subtract, divide and multiple.

ADEQUATE

_____ With assistance can make out monthly budget covering regular expenses for independent living.

_____ Shows some "sales resistance" to "something for nothing" advertising and "low weekly payment" credit plans.

_____ Can read monthly bank statements, compare balances, make adjustments as necessary (deduct service charges, check fees, adjust for differences in the balance).

_____ Can comparison shop using unit pricing information.

_____ Understands the responsibility of filing a federal and state tax form. Knows the information that is required for filing taxes and knows where to go to get assistance in filing taxes.

EXCEPTIONAL

_____ Budgets for unanticipated emergencies, seasonal bills, etc.

_____ Understands buying on credit, loans, interest and late payment penalties.

_____ Understands payroll deductions, taxes, FICA, insurance.

_____ Understands what a good credit rating is, how it can be obtained and maintained.

_____ Can complete a short tax form.

_____ Can balance a checkbook.

_____ Has regular savings program.

LIFE SKILLS INVENTORY

LIFE SKILLS INVENTORY COVER SHEET

NAME OF YOUTH: _____

DATE OF BIRTH: _____

PERSON(S) INVOLVED IN LIFE SKILLS ASSESSMENT DATES OF ASSESSMENT

_____

_____

_____

_____

CATEGORY DATE SKILL LEVEL ATTAINED

	Minimum	*Intermediate*	*Adequate*	*Exceptional*
Money Management/ Consumer Awareness				
Food Management				
Personal Appearance & Hygiene				
Health				
Housekeeping				
Housing				
Transportation				
Educational Planning				
Job Seeking Skills				
Job Maintenance skills				
Emergency and Safely Skills				
Knowledge of Community Resources				
Interpersonal Skills				
Legal Skills				

CATEGORY: PERSONAL APPEARANCE AND HYGIENE

MINIMAL

_____ Can dress self (including underwear, socks, and tied shoes) in a reasonably acceptable fashion.

_____ Can bathe self.

_____ Knows how to use soap, shampoo, deodorant, shaving cream and other common personal products appropriate to sex.

INTERMEDIATE

_____ Showers or bathes regularly.

_____ Brushes teeth regularly.

_____ Keeps hair clean and neat.

_____ Dresses in reasonably clean clothing.

ADEQUATE

_____ Can read clothing labels and determine which clothes are to be dry cleaned, hand washed and machine washed.

_____ Can sort and machine wash clothes at a laundromat using appropriate temperatures, amounts of soap, bleach, etc.

_____ Can dry clothes in a dryer using appropriate settings.

_____ Knows approximate cost of dry cleaning and can arrange for dry cleaning.

_____ Can hand wash items following the instructions on the label.

_____ Can iron clothes.

_____ Can sew on button and make minor clothing repairs.

EXCEPTIONAL

_____ Knows the cost of and can budget money for special hair and nail care. (i.e., permanents, braiding, manicures, etc.)

_____ Knows appropriate clothing to wear for almost all occasions.

CATEGORY: FOOD MANAGEMENT

MINIMAL

_____ Can order in a cafeteria or fast food restaurant.

_____ Can set the table properly.

_____ Knows name and use of cooking utensils.

INTERMEDIATE

_____ Can order a meal from the menu in a family-style restaurant.

_____ Can fix a breakfast for one.

_____ Can fix a lunch for one.

_____ Can fix a dinner for one.

_____ Can make out a grocery shopping list.

_____ Can carry out a grocery shopping trip. (Selecting items on the shopping and paying the cashier.)

_____ Can use cooking utensils effectively and safely (knives, grater, can opener, potato peeler, egg beater, etc.)

_____ Can use kitchen appliances effectively and safely.

ADEQUATE

_____ Stores perishables under refrigeration.

_____ Recognizes signs of spoilage in food.

_____ Can follow the instructions for preparing canned or frozen foods.

_____ Can use acceptable table manners.

_____ Can plan weekly menu of nutritious meals.

_____ Can shop for a week's menu and stay within a food budget.

_____ Can prepare all meals on a week's menu.

EXCEPTIONAL

_____ Can follow recipes from a cookbook.

_____ Can adjust recipes to feed more or less people that called for in the recipes.

_____ Understands how to use dates on food packages to prevent spoilage.

_____ Takes advantage of specials, seasonal produce, coupons, farmers markets, etc.

_____ Understands and can use unit pricing to comparison shop.

CATEGORY: HOUSEKEEPING

MINIMAL

_____ Can wash dishes adequately using soap and hot water.

_____ Can change a light bulb.

_____ Can make bed.

_____ Knows how to sweep floor and stairs, wash wood and linoleum floors, wash windows, dust, polish furniture, clean toilet, clean bath tub and sink.

_____ Knows appropriate cleaning products to use for different cleaning jobs.

_____ Knows how to dispose of garbage.

INTERMEDIATE

_____ Can use vacuum cleaner properly and change bags.

_____ Can change bed linen.

_____ Knows how to prevent sinks and toilets from clogging.

ADEQUATE

_____ Knows how to stop a toilet from running.

_____ Knows how to use a plunger to unstop a toilet or sink.

_____ Can defrost the refrigerator, if necessary.

_____ Can clean a stove.

_____ Knows what repairs a landlord should perform.

_____ Knows how to conserve energy and water.

EXCEPTIONAL

_____ Perform routine house-cleaning to maintain the home in a reasonably clean state.

_____ Uses drawers and closets appropriately for storage.

_____ Can do minor household repairs.

_____ Is able to contact the landlord and request repairs.

_____ Can change a fuse or reset a circuit breaker.

_____ Can measure a window for shades or curtains.

_____ Knows how to get rid of and avoid roaches, ants, mice, etc.

CATEGORY: HEALTH

MINIMAL

_____ Can open child proof container.

_____ Knows not to take someone else's medication.

_____ Knows that drugs, alcohol and tobacco may be harmful to your health.

_____ Knows parts of the body and sexual functioning.

_____ Knows how pregnancy occurs.

INTERMEDIATE

_____ Can recognize and describe symptoms of colds, flu and other common health problems.

_____ Knows how to get emergency health care.

_____ Knows what to do for a minor cut, a minor burn, a splinter.

_____ Understands the risks of pregnancy and sexually transmitted diseases.

_____ Understands the risks of drug and alcohol abuse.

ADEQUATE

_____ Can take own temperature using an oral thermometer.

_____ Can nurse self through cold or flu.

_____ Recognizes and makes correct use of "over the counter" drugs for pain, stomach upset, diarrhea, fever, cold/allergy symptoms.

_____ Can call a doctor or dentist and schedule an appointment.

_____ Can read a prescription label correctly and follow the instructions.

_____ Can take medication without supervision.

_____ Knows how to dispose of drugs in a safe manner.

_____ Knows how to use what is included in a First Aid Kit.

_____ Has a copy of personal immunization records and medical history.

_____ Knows methods of birth control and how to obtain birth control devices.

_____ Knows how to prevent the spread of sexually transmitted diseases.

_____ Has selected a doctor, dentist or clinic for regular health care.

EXCEPTIONAL

_____ Is conscious of diet, exercise, good eating habits and other preventative health measures.

_____ Can determine when to go to an emergency room and when to make an appointment with the family doctor or clinic.

_____ Understands the importance of medical insurance and how to obtain it.

CATEGORY: TRANSPORTATION

MINIMAL

_____ Knows amount of money required for bus fare.

_____ Can make solitary trip on public transportation between two designated points.

_____ Can ride bicycle safely.

_____ Knows what is required to get a driver's license.

INTERMEDIATE

_____ Knows how to call a taxi and provide information needed.

_____ Knows the approximate cost of taking a taxi.

_____ If given instructions, can make public transportation journey involving several transfers.

_____ Can obtain monthly or student bus pass.

ADEQUATE

_____ Can use information on public transportation routes to get to any location on public transportation system.

_____ Knows how to travel between cities by bus or train. (Knows how to obtain travel information, make reservations, purchase tickets, get to station, find train/bus,etc.)

_____ Can arrange routine transportation to work or school.

EXCEPTIONAL

_____ Can read a map.

_____ Has a driver's license.

_____ Can give directions.

_____ Can fix bicycle.

_____ Knows how to do basic car maintenance.

_____ Can estimate cost of owning and operating a car for a month/year.

CATEGORY: HOUSING

MINIMAL

_____ Understands the concept of renting and knows the role of a landlord.

INTERMEDIATE

_____ Can read want ads for vacancies.

_____ Understands basic terms (lease, sub-let, utilities, studio, efficiency, security deposit, reference, etc.)

_____ Can calculate the costs associated with difference types of housing.

ADEQUATE

_____ Can identify type of housing that is within budget and meets current housing needs.

_____ Can calculate "start up" costs. (Utility deposits, connection fees, security deposit, first month's rent, purchase of furniture and all other household items.)

_____ Can complete a rental application.

_____ Can ask the landlord about apartment to determine if apartment meets needs.

_____ Knows to inspect the apartment to make sure appliances work and that the landlord as supplied accurate information about the apartment and the neighborhood.

_____ Shows some concerns for the rights of other residents with regard to property and noise.

_____ Understands the implications if the rights of other residents are not respected.

_____ Understands the implication of the security deposit.

EXCEPTIONAL

_____ Demonstrates the ability to get along with other residents and the landlord.

_____ Knows how to get help if there is a conflict with the landlord.

CATEGORY: JOB SEEKING SKILLS

MINIMAL

_____ Has reasonable idea of the types of jobs will be available to him/her.

_____ Knows what the minimum wage is.

INTERMEDIATE

_____ Can fill out a standard job application form.

_____ Can read the want ads and find appropriate leads.

_____ Can complete a mock interview giving appropriate answers to potential questions.

ADEQUATE

_____ Has a completed job application/fact sheet to take on a job interview.

_____ Can make appointment for a job interview.

_____ Knows to prepare for a job interview.

_____ Knows appropriate clothing to wear for the interview.

_____ Can complete a job interview.

_____ Knows the function of and contact the public employment agency.

_____ Knows the function of and can contact private employment agencies. Understands that private employment agencies charge fees.

_____ Can identify ads placed by private employment agencies.

EXCEPTIONAL

_____ Can write a resume.

_____ Can follow up an interview with a letter.

_____ Is able to maturely weigh the advantages of one job over another.

_____ Understands legal discrimination and where to seek help is discriminated against illegally.

CATEGORY:EDUCATIONAL PLANNING

MINIMAL

_____ Has a realistic view of his/her chances for completing high school and/or seeking higher education.

INTERMEDIATE

_____ If high school graduation is not realistic, understands what a GED is and how to obtain one.

_____ Understands future prospects and probable living standards relative to specific levels of education and/or specialized skills.

ADEQUATE

_____ Can fill out forms to enroll in an educational program.

_____ Has a general idea of what job he/she wants.

_____ Has an appropriate educational plan for the job selected.

_____ Understands educational/skill requirements for job selected.

_____ Can discuss educational/vocational plans with teachers/ counselor.

_____ Is aware of the cost of higher education/vocational training.

_____ Knows the difference between a loan and a grant.

_____ Is aware of educational resources available in the community.

EXCEPTIONAL

_____ "Shops around" to find the best educational resources.

_____ Knows where to find and how to access adult education or vocational training in the community.

_____ Knows how to obtain financial aid/scholarships for additional education.

CATEGORY: JOB MAINTENANCE SKILLS

MINIMAL

_____ Dresses for work appropriately.

_____ Reports to work on time.

_____ Knows job responsibilities and how to complete job tasks.

INTERMEDIATE

_____ Knows how to read a pay stub.

_____ Knows to contact employer when not able to go to work.

_____ Knows what behaviors will get a person fired immediately.

_____ Knows how to ask for help with a problem on the job.

ADEQUATE

_____ Knows if eligible for sick time, vacation time or personal time.

_____ Knows what a grievance procedure is.

_____ Knows what to do to get a raise.

_____ Knows when and when not to talk with co-workers.

_____ Knows appropriate way to talk to supervisor.

_____ Has a plan for handling anger when angry at supervisor, co-workers, or customers.

EXCEPTIONAL

_____ Can implement anger management plan in majority of cases.

_____ Knows how to use company grievance procedure to resolve disagreements.

_____ Knows companies "unwritten polices" and can function within them.

_____ Knows how to ask for a raise.

_____ Knows what to do to be eligible for promotion.

_____ Knows legal rights as an employee.

CATEGORY: EMERGENCY AND SAFETY SKILLS

MINIMAL

_____ Knows functions of police, ambulance and fire department. Can reach each by calling the appropriate number

_____ Is trained to evacuate the residence in case of fire.

_____ Knows proper way of exposing of smoking materials, if smokes.

_____ Knows how to lock and unlock door and windows.

INTERMEDIATE

_____ Understands basic fire prevention. (No smoking in bed, using gas stove to heat, excessive use of extension cords, frayed electrical cords,etc.)

_____ Knows how to check smoke alarm and how to replace battery.

_____ Knows that improperly used appliances can cause fires.

_____ Can recognize the smell of a gas leak.

_____ Knows what to do, who to call if she/he smells a gas leak.

ADEQUATE

_____ Knows how to use a fire extinquisher.

_____ Knows the different methods for putting out different kinds of fires.

_____ Knows how to properly store cleaning materials.

_____ Can usually determine when professional medical help is needed.

EXCEPTIONAL

_____ Has completed First Aid training.

_____ Has completed CPR training.

CATEGORY: KNOWLEDGE OF COMMUNITY RESOURCES

MINIMAL

_____ Knows location of nearest post office and how to use it.

_____ Knows how to get information by telephone.

_____ Knows where nearest park is located.

_____ Knows where nearest supermarket or shopping district is located.

INTERMEDIATE

_____ Knows where nearest laundromat is located.

_____ Knows where personal bank is located.

_____ Can use the yellow pages to obtain information.

ADEQUATE

_____ Knows who to contact if lost , frightened, depressed, anxious, sick, injured, out of food and money, utilities disconnected, or heat goes out.

_____ Knows where and how to register for selective service.

_____ Knows where the nearest state employment office is located.

_____ Can obtain a copy of birth certificate and a duplicate social security card.

EXCEPTIONAL

_____ Has awareness of "specialized" resources: mental health counseling, consumer counseling, VD clinics, student aid offices, tenant groups, animal control, public recreation, etc.

_____ Knows who elected representatives are and how to contact them.

_____ Has obtained a library card.

_____ Knows what the Better Business Bureau does and how to contact it.

CATEGORY: INTERPERSONAL SKILLS

MINIMAL

_____ Can respond to introductions and answer simple questions.

_____ Can identify personal strengths and needs (with assistance if necessary).

_____ Has "good" table manners. (Can use knife, fork, spoons, napkin appropriately.)

INTERMEDIATE

_____ Looks others in the eye and shakes hands if other person offers.

_____ Can make "small talk" (face to face).

_____ Can make introductions, including approaching others to introduce self.

_____ Can establish a realistic goal to meet an identified personal need. (with assistance if necessary)

ADEQUATE

_____ Accepts invitations from others to be involved in social activities.

_____ Makes arrangements with peers for social activities.

_____ Knows where to get help if unable to resolve interpersonal conflicts alone.

_____ Has some ability to resolve conflicts with others.

_____ Refrains from physical violence as a means of solving interpersonal conflict.

_____ Has practiced (in role play or mock situation) how to say "no" to a peer who is trying to persuade him/her to do something wrong.

_____ Can develop a realistic plan with appropriate steps identified to achieve goal.

_____ Can carry out plan with some assistance provided.

_____ Can describe the "best possible" outcome if the goal is achieved and the "worst possible" outcome if the goal is not achieved.

_____ Can describe the relationship between actions and consequences.

EXCEPTIONAL

_____ Labels and expresses anger or other strong feelings appropriately, "talks out" problems rather than "acting them out".

_____ Has demonstrated the ability to say "no" to peers.

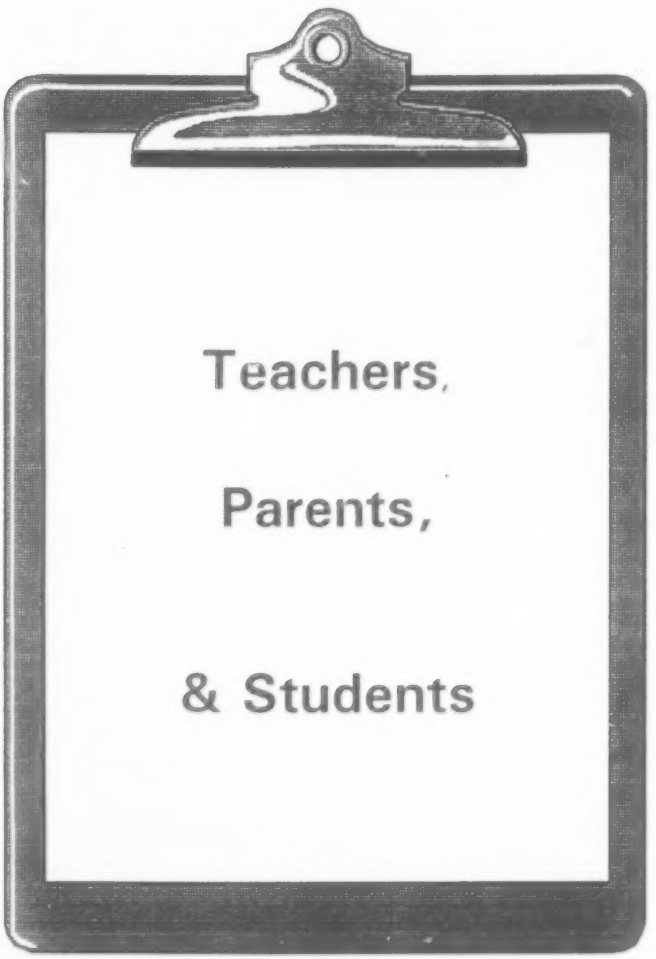
_____ Can develop and carry out a personal plan for goal achievement without constant supervision.

_____ Can anticipate, with limited input from others, what consequences might be associated with different choices.

_____ Knows when and how to send a written thank you note.

TRANSITION ASSESSMENT:

A Tool For



Developed by CESA #2
Wisconsin's Design for Transition Success Project
Barb Noll, Director/Mark Flottum, Staff

Funded in part by OSERS/US Department of Education, Grant #H158A30014 under the Individuals with Disabilities Education Act

DVR

Product of Wisconsin's Design for Transition Success Project

DPI

CATEGORY: LEGAL ISSUES

MINIMAL

_____ Would have the phone number of someone to call if arrested or victimized.

_____ Understands generally what actions are against the law and what the consequences are.

INTERMEDIATE

_____ Knows rights of arrest.

_____ Knows what the function of a lawyer is.

_____ Knows legal age for buying alcohol and tobacco products.

_____ Understands the meaning of "legal age" in legal terms. (What you can do what you cannot do.)

_____ Knows the legal requirements for marriage.

ADEQUATE

_____ Knows responsibility for registering for selective service, if male.

_____ Aware of availability of free legal services.

_____ Understands the consequences of signing a contract or a lease.

_____ Knows legal penalty for

- _____ Buying, possessing, selling and smoking marijuana and other drugs,
- _____ Buying and drinking beer and alcohol underage,
- _____ Trespassing,
- _____ Shoplifting,
- _____ Burglary,
- _____ Possession of stolen property,
- _____ Traffic violations.

EXCEPTIONAL

_____ Shows good citizenship and an understanding of the rights and responsibilities of a citizen.

_____ Knows how and where to register to vote.

_____ Knows where to go to vote.

_____ Knows the difference between "felony," "misdemeanor," and "violation."

Most items can be assessed by noting them as: a strength, average, or change needed. Some of the items on the assessment are better answered by a yes or no response; those items are identified by +/- next to them and can be answered in the yes(+)/no(-) column. In some cases, you may not have formed an opinion or noted a specific skill or ability. If so, check the "not assessed" column, then focus your observations over the next few months or the next year on that specific item.

Once something is noted as a strength, it doesn't mean that it will always remain this way. Items noted as strength or average, should be reviewed at least annually.

By using this basic form of assessment, it should help the teachers focus on transition goals and make the IEP development easier. For parents, it will help you maintain an active role in your student's education and serve as a basis for good communication with the schools. For the students, it helps you focus on issues that are important not only to your school program, but will help make a difference when you're looking for employment and planning to move out on your own.

Please remember, when teachers, parents, and students are doing IEP planning, not everything can be addressed every year. You may want to pick out the three or four most critical areas and focus on them for IEP development. Sample transition goals and objectives are attached to the back of this form for your review. Most of the goals and objectives were developed by the State of Minnesota, Education Department. Use them as a guide to your own IEP development.

TRANSITION ASSESSMENT: A TOOL FOR TEACHERS, PARENTS, AND STUDENTS

Transition is the process of moving from school to work, moving from home to independent living, and moving from childhood, to adolescence to adulthood. It is important to keep in mind that transition is a long term process, not something that happens at one time or in one place.

It is the legal responsibility of the school system to address or assess five major areas of transition during a student's school years. The five specific areas that the school systems must address are: 1) Employment / job training, 2) Home and daily living skills / personal management, 3) Recreation / leisure needs, 4) Community participation, 5) Post secondary education. All of these areas play a part, to some degree, in everyone's life. If it is the job of the education system to educate students in preparation for adult life, then we must look at these areas as well as the specific academic course work.

Some of the skills or abilities needed in these areas cannot be measured by formal testing, many times we know what a person can and cannot do based upon our own observations and related opinions.

Attached is a checklist of skills, abilities, and characteristics. There is a section for each of the five areas noted above. This checklist is not something that is done one time, then filed away. It is intended to be a document or tool that is started in elementary or middle school. It is to be reviewed and updated over the course of each year and should follow the student through completion of their education.

The value of this type of assessment is that it keeps teachers, parents, and students focused on the same things. It is an ongoing assessment because the format doesn't change from year to year; it remains constant. If two or more individuals are doing an assessment on a child, you may see different answers or opinions, and that's not a problem. We know that individuals behave differently in different environments. What may be a problem at home may not be an issue at school. What may be an issue in one classroom, may not be in another. Sometimes there are behaviors that a teacher notices in a group setting that may never be seen within the home. We also know that one's opinion of one's self is not always shared by others. We can all learn from one another's opinions and observations.

Employment/Job Training

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
C. Join in extracurricular activities						
12. Aware of safety precautions						
13. Respect of & ability to care for equipment						
14. Show self control/frustration management						
15. Ability to ask for assistance						
16. Ability to perform job adequately						
A. Uses appropriate techniques						
B. Uses correct materials/tools						
C. Completes task						
17. Confidence in performing job tasks						
18. Ability to maintain quality work						
A. Recognize, analyze problems w/patience						
B. Identify early signs of problems						
C. Consults w/others, gathers information						
D. Considers alternative solutions						
19. Ability to maintain a productive pace						
20. Has knowledge/acceptance of rules						
A. Understands employment conditions						
B. Undertstands work conditions						
C. Understands personnel procedures						
21. Flexability for different types of jobs						
22. Willingness to work						
23. Has image of self as worker, oriented to work, interest in job						
24. Physical endurance and stamina						

Review

Review

Review

Employment/Job Training

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
1. Good Attendance						
2. Punctuality						
A. Arrives early, ready to work						
B. Takes breaks and leaves at proper time						
3. Acceptance of Supervision						
A. Will change behavior when asked						
B. Respects authority of teacher/parent						
C. Pays attention to direction						
D. Resolves opinion differences satisfactorily						
E. Participates in class programs						
F. Requests clarification when necessary						
4. Ability to accept criticism appropriately						
5. Ability to follow directions						
A. Verbal						
B. Sign or symbols						
C. Simple written						
D. Complex (multi-step) written						
6. Stays on task until completed						
7. Manages time effectively						
8. Cleans up work area after self						
9. Can work independently						
10. Can adapt to new people/situations						
11. Ability to cooperate with others						
A. Work in groups, share responsibilities						
B. Share in other student's honor						

Review

Review

Review

Employment/Job Training

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
Q. Lifting strength						
28. Accepts responsibility						
29. Demonstrates helping behavior/teamwork						
30. Takes pride in work						
31. Demonstrates good judgement/problem solving skills						
32. Manages personal problems outside of work/school						
33. Anticipates consequences of personal actions						
34. Job-seeking skills						
A. Knows how to read want ads						
B. Knowledge of area employers						
C. Knowledge of Job Service						
D. Has ability to contact employers						
* can locate job sites						
* can use telephone correctly						
* can introduce self properly						
E. Has knowledge of application process						
* writes legibly						
* knows addresses, phone numbers, etc.						
* knows references						
* familiar with application forms, terms						
* can write a resume'						
* can write a cover letter						
* can write a letter of application						

Review | Review | Review

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Employment/Job Training

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
25. Has realistic job goals (list)						
A.						
B.						
C.						
26. Initiative						
A. Inquires about tasks and related work						
B. Seeks additional tasks when work done						
C. Willing to practice/request feedback						
27. Exihibits pre-vocational skills						
A. Fine finger dexterity						
B. Gross manual dexterity						
C. Bi-manual dexterity						
D. Small tool usage						
E. Hand-eye coordination						
F. Size discrimination						
G. Physical endurance						
H. Upper extremity range of motion						
I. Basic control (sorting/filing/bookkeeping)						
J. Color discrimination						
K. Form perception						
L. Spatial perception						
M. Manual assembly skills						
N. Hand-eye-foot coordination						
O. Ability to measure						
P. Handle money						

Review | Review | Review

Employment/Job Training

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J. Color discrimination						
K. Form perception						
L. Spatial perception						
M. Manual assembly skills						
N. Hand-eye-foot coordination						
O. Ability to measure						
P. Handle money						

Review

Review

Review

Community Participation

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
1. Mobility						
A. Is independent, can transport self (level depends on age, ie. bike, car, walk)						
B. Understands/can use public transportation						
C. Family members willing to aid in transportation						
D. Specialized transportation needed, is available, can be accessed						
2. Personal Safety						
A. Can assess and understand motives of others						
B. Has understanding of personal safety, dangerous situations, etc.						
C. Knows when/how to contact police, fire department, 911, etc.						
D. Has knowledge of home safety requirements						
E. Has knowledge of weather related hazzards (ie. tornado, lightning, freezing, etc)						
F. Knows name of family doctor, clinic or other medical care providers						
3. Social/Sexual						
A. Can explain physical differences between men and women						
B. Understands how/when pregnancy occurs						

Review

Review

Review

Employment/Job Training

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
F. Appropriate interviewing skills						
* dresses appropriately						
* proper grooming						
* good eye contact, posture, manners						
G. Aware of job requirements						
* aware of specific required skills						
* aware of own strengths						
* aware of own weaknesses						
* can relate school-to-work experiences						
* can locate information on requirements						
H. Aware of resources for assistance						
* DVR +/-						
* County Human Services +/-						
* JTPA +/-						
* WTCS (VTAE) +/-						
* family members +/-						
* library resource materials +/-						
* high school co-op, work experience prog.						
* Social Security +/-						
* D.D. Board +/-						
* Project Assist +/-						
I. Is aware of nontraditional career options						
J. Is aware of issues of Sexual Harassment in the work place						

Review | Review | Review

Community Participation

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
D. Student can explain how they can compensate for lost function or ability						
6. Student knows/understands issues of family Medical History						
7. Advocacy/Legal Needs - If these are long term needs noted due to physical, mental or emotional care issues . . .						
A. Have issues of guardianship been explored by family/student						
B. Have appropriate support agencies been contacted or referred to						
* D.D. Board +/-						
* D.V.R. +/-						
* Legal Aid +/-						
* Mental Health Services +/-						
* Other - List . . . +/-						
*						
*						
C. Has Social Security office been contacted (SSI benefits, support plans) +/-						
D. Have long term, secure living arrangements been made +/-						

Review

Review

Review

Community Participation

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
C. Understands issues of pregnancy prevention/birth control						
D. Understands issues of sexually transmitted diseases						
E. Understands issues regarding AIDS						
4. Medical needs						
A. Has understanding and is responsible for taking medication/getting prescriptions filled						
B. Knows when a doctor or dentist should be contacted. Responds appropriately to illness or injury						
C. Can answer questions regarding common medical issues (ie. burns, cuts, nose bleeds)						
D. Understands availability of group insurance such as Medicaid, Blue Cross, HMO's, etc.						
5. Medical Supervision - If medical supervision is necessary on an ongoing basis, short or long term for physical or mental health, can . . .						
A. Student explain needs for medical care						
B. Student take care of, or participate in medical care						
C. Student explain long range plans for medical care						

Review

Review

Review

Home & Daily Living Skills/Personal Management

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
A. Proper weight & build for health						
B. Has basic knowledge of nutrition						
C. Gets daily exercise						
D. Good posture						
4. Hygiene and Grooming						
A. Brushing teeth daily						
B. Keeps hands clean						
C. Takes daily showers or baths						
D. Uses deodorant daily						
E. Shaves regularly (or trims beard)						
F. Cleans and trims nails						
G. Make-up is appropriate and fresh						
H. Hair care is . . .						
* cut and styled appropriately for age						
* washed as needed						
* kept neatly combed						
* combed in private						
5. Basic Household						
A. Can plan a menu						
B. Can purchase food						
C. Can use coupons						
D. Can do simple cooking						
E. Can do laundry						
F. Can wash dishes						
G. Can clean floors, toilets, etc.						

Review

Review

Review

Home & Daily Living Skills/Personal Management

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
1. Managing Personal Finances						
A. Can identify units of money						
B. Can count money, make change						
C. Can develop personal budget						
D. Can make reasonable expenditures						
E. Can keep basic financial records						
F. Understands use of savings account						
G. Understands use of checking account						
H. Understands use of credit						
I. Can use bank service appropriately						
J. Can explain payroll deductions						
K. Understands concept of taxes						
L. Recognizes need to pay bills on time						
2. Clothing and care						
A. Can dress self						
B. Chooses appropriate clothing						
* for build						
* for style						
* for occasion						
* for age						
* for season						
* for disabilities (modifications)						
C. Clothing is neat/clean						
D. Footwear is appropriate/clean						
3. Basic Health Habits						

Review

Review

Review

Post Secondary Education

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
1. Student Can Explain Need and/or Value of Post Secondary Education for Them						
2. Student Can Identify Post Secondary Options and Differences Between Them						
3. Student/Family Has Expressed Interest In . .						
A. Universities +/-						
B. Community colleges +/-						
C. Vocational/technical colleges +/-						
D. Community education courses +/-						
E. Apprenticeship programs +/-						
F. Military services +/-						
G. On-the-Job Training +/-						
H. Vocational exploration +/-						
I. Other						
*						
*						
4. Have specific schools or training programs been contacted? +/-						
5. Have financial aids been explored +/-						
6. If disability related services are needed, the student:						
A. Understands rights as established by 504, IDEA, and ADA						
B. Can identify reasonable accommodations						
C. Has assertive communication skills						

Review | Review | Review

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Recreation/Leisure Needs

Skill/Ability/Characteristic	Strength	Average	Change Needed	Not Assessed	Yes (+) or No (-)	Comments/Recommendations
1. Can Identify School Sponsored Extra-curricular Activities (ie. FFA, Yearbook, Drama, Ski Club, etc.)						
2. Can Identify Activities Through Church or Community Programs (ie. YMCA, Scouts, Youth Recreation, etc.)						
3. Willingness to Participate						
4. Can Identify Individualized Activities or Hobbies						
5. Has Knowledge of Board Games or Card Games for Groups						
6. Can Identify Acceptable Dress for a Variety of Situations						
7. Can Identify Transportation Options						
8. Can Make Own Transportation Arrangements						
9. Can Identify Issues/Rights Regarding Physical Accessability						
10. Can Advocate for Own Needs and Interests						
11. Has Knowledge of Resources Available Outside Home Area (Theaters, Museums, etc.)						
12. Can Identify/Establish Exercise Routine						
13. Responds Appropriately in Exercise Setting						

2..

Review	Review	Review

EMPLOYMENT AND JOB TRAINING_____

GOAL: To improve skills in selecting and planning occupational choices from ____ to ____.

I will make realistic occupational choices by selecting ____ jobs of interest and obtaining information through research, site visits and/or job tryouts.

I will identify the requirements of ____ appropriate and available jobs.

I will identify ____ occupational interests and list jobs appropriate to those interests.

GOAL: To improve competitive work habits and behaviors from ____ to ____.

I will follow directions by performing a series of tasks in response to verbal and written instructions with ____% accuracy.

I will recognize the importance of punctuality by maintaining a ____% attendance/punctuality record.

I will recognize the importance of supervision by demonstrating the appropriate response to supervisory instruction with ____% accuracy.

I will demonstrate knowledge of occupational safety by identifying the safety hazards on ____ jobs.

I will demonstrate the ability to work with others by completing ____ tasks with other persons.

I will meet demands for quality work by performing work tasks with minimum quality standards.

I will perform work at a satisfactory rate on a given job.

EXAMPLES OF TRANSITION GOALS AND OBJECTIVES THAT CAN BE USED IN THE IEP.

Note: The objectives are not complete and are only meant to provide samples. For complete objectives, the conditions or circumstances under which the behavior is performed, criteria for attainment, and a target date for attainment must be added.

When adding or developing new goals and objectives, keep in mind "I" statements: "I will ..... make, identify, follow, recognize, demonstrate, meet, know, perform, complete, keep, calculate, choose, plan, locate, find, list, develop, etc."

Many of the following goals and objectives were written as examples by the Minnesota Dept. Of Education.

I will demonstrate knowledge of available community recreation resources by participating in ____ recreational activities outside the home.

I will choose and plan activities by developing an individual plan of leisure activities.

I will demonstrate knowledge of the value of recreation by listing ____ ways that recreation affects physical and mental health.

I will develop a proposed vacation plan including cost ,time, transportation, facilities, and activities.

GOAL: To increase participation in school related activities.

I will attend ____ monthly meetings of school sponsored clubs or organizations.

I will participate in all class related field trips.

HOME AND DAILY LIVING SKILLS_____

GOAL: To Improve management of personal finances from ____ to ____ .

I will identify money and make correct change from bills and coins less than or equal to ____ .

I will make responsible expenditures by identifying and comparing prices and selecting the most economical items with ____ % accuracy.

I will keep basic financial records including a personal budget, calculating income expenses and debts with ____ % accuracy.

I will calculate taxes correctly using a 1040 tax form with ____ % accuracy.

GOAL: To improve skills for seeking, securing, and maintaining employment from ____ to ____ .

I will demonstrate knowledge of job seeking skills by identifying the steps involved in a job search.

I will demonstrate knowledge of job application skills by completing an application and resume with ____% accuracy.

I will complete a real (simulated) job interview.

I will demonstrate occupational adjustments by identifying common problems and solutions encountered on the job.

I will demonstrate knowledge of competitive standards by determining the minimum level of skill and performance requirements needed for a specific job.

I will demonstrate knowledge of how to adjust to changes in employment by identifying ____ factors that lead to successful and unsuccessful employment.

GOAL: I will focus on, and improve on pre-vocational skills.

I will demonstrate the ability to tell time by successfully giving my teachers or parents the correct time from my watch when asked.

I will demonstrate knowledge of linear measurement, to 1/4 inch, by identifying points on a ruler with ____% accuracy.

I will develop better upper extremity range of motion by doing my prescribed exercise routine ____ times per week at school and home.

RECREATION AND LEISURE _____

GOAL: To increase use of community recreational facilities and leisure activities from ____ to ____ .

I will demonstrate knowledge of common illnesses, prevention, and treatment with ____ % accuracy.

I will identify and practice personal safety rules in the home and in the community with ____ % accuracy.

GOAL: To improve skills for raising children and meeting marriage responsibilities from ____ to ____ .

I will identify physical care responsibilities for raising children with ____ % accuracy.

I will identify the psychological needs of children and parental responsibilities of meeting those needs with ____ % accuracy.

I will identify personal and joint marriage responsibilities with ____ % accuracy.

GOAL: To improve skills for buying, preparing, and consuming food from ____ to ____ .

I will construct a shopping list within budget limits using grocery advertising with ____ % accuracy.

I will demonstrate appropriate cleaning procedures for food preparation work areas with ____ % accuracy.

I will demonstrate proper food storage procedures to avoid spoilage with ____ % accuracy.

I will demonstrate my knowledge of kitchen safety, basic recipe abbreviations, and appliances while preparing a meal for ____ people.

I will demonstrate the proper way to set a table and appropriate manors and eating behavior ____ out of ____ observations.

I will include the basic food groups in planning meals for one

I will demonstrate responsible use of credit by identifying ____ resources for obtaining a loan and listing ____ advantages and disadvantages of using credit cards.

I will demonstrate correct use of these banking services: Checking account, savings account, check writing, and checkbook balancing with ____ % accuracy.

GOAL: To improve skills for selecting and managing a household from ____ to ____ .

I will identify the basic appliances, tools, and cleaning products and their uses in maintaining the home exterior and interior with ____ % accuracy.

I will demonstrate the use of basic home appliances and household tools with ____ % accuracy.

I will identify a minimum of ____ affordable and adequate housings choices in my community.

I will identify the procedures and items needed to set up a household with ____ % accuracy.

I will perform common home maintenance tasks and repairs including ____ (examples: grass cutting, painting, repair leaking faucet, etc,).

GOAL: To improve skills necessary to care for personal needs from ____ to ____ .

I will identify ways in which physical fitness and weight relate to health with ____ % accuracy.

I will identify proper grooming and hygiene habits and products with ____ % accuracy.

I will identify and demonstrate appropriate dress for various weather conditions, activities and occasions with ____ % accuracy.

the assistance of an aid or another student.

I will work on specific exercises and chair-to-seat transfers ____ times per week, ____ minutes per day.

COMMUNITY PARTICIPATION_____

GOAL: To increase responsible citizenship behaviors from ___ to ___.

I will demonstrate knowledge of civil rights and responsibilities by listing basic civil rights, resources for acquiring legal aid, and draft registration requirements with ____ % accuracy.

I will know the nature of local, state, and federal governments by identifying the purpose and one duty of each level of government.

I will demonstrate knowledge of the law by listing _____ local laws and the consequences of violating those laws.

I will demonstrate knowledge of citizen rights and responsibilities by listing ____ available community services and ____ citizen responsibilities.

GOAL: To improve skills to access the community from ____ to ____.

I will demonstrate knowledge of traffic and safety rules by identifying common traffic and safety rules with ____ % accuracy.

I will demonstrate knowledge and use the various means of transportation by demonstrating the appropriate procedures for use of ____ (examples; bus, taxi, mobility services, etc.).

I will find my way around the community by locating ____ specific sites using maps and directions.

I will demonstrate the ability to drive a car by passing the verbal and written portion of the driver's license examination.

day with ____ % accuracy.

GOAL: To improve skills for buying and caring for clothing from ____ to ____ .

I will demonstrate appropriate laundering procedures, use of laundry facilities and laundry products with ____ % accuracy.

I will plan an appropriate wardrobe that contains basic clothing items appropriate for dress, work, and casual wear within a budget.

I will demonstrate the proper ironing, mending, and storage procedures for common clothing items with _____ % accuracy.

GOAL: To improve decision-making skills from ____ to ____.

I will locate and use sources of assistance when faced with problematic situations.

I will anticipate consequences by listing ____ ways in which personal behavior produces consequences.

I will develop and evaluate alternatives by selecting a personal goal and listing ____ possible alternatives to achieving the goal.

I will recognize the nature of a problem by listing positive and negative aspects of a given problem or situation.

I will develop goal seeking behaviors by setting short-term and long-term goals for school, home work or recreation.

GOAL: To demonstrate increased awareness and performance in mobility at home, in school, and within the community.

I will keep my electric wheelchair in good working order by having it checked each time I go to University Hospital.

I will go between room ____ and room ____, 3rd hour without

W.O.R.C.
WORK OPPORTUNITY IN RURAL COMMUNITIES, INC.
136 Owen Road Monona, Wisconsin 53716 (608)221-2102

FUNCTIONAL ASSESSMENT

Functional Assessment for: _____

Person responsible for compiling information: _____

Date: _____

Persons involved in the Functional Assessment:

	NAME	POSITION/RELATIONSHIP
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Locations/Environments where information was gathered:

1. _____
2. _____
3. _____
4. _____
5. _____

POST SECONDARY EDUCATION AND TRAINING_____

GOAL: To increase knowledge about post-secondary education from ____ to ____.

I will participate in site visits of ____ post-secondary education institutions.

I will list the requirements necessary for entrance into ____ post-secondary education institutions.

I will complete all the requirements necessary for entrance into one post-secondary institution.

I will develop a written post-secondary plan listing the options selected for post-secondary education and training.

I will complete all the requirements necessary to access selected adult service agencies (Select appropriate agency, such as DVR, county social services, advocacy organizations, etc.)

I will complete all the requirements to access funding sources to support selected post-secondary educational choices. (Select appropriate sources, such as DVR, college financial aid office, school guidance counselor for local scholarship information, etc.)

Special Religious Practices:_____

_____

Special Cultural Practices:_____

_____

How supportive is the family of the individual's work?
Comments:_____

_____

Significant others (family, friends, etc.) in the person's life (unpaid relationships):

_____

_____

_____

Other Support Services:

Agency	Contact Person	Telephone #
Purpose	Frequency of contact	

_____

A Future's Planning Relationship Map can be made to visually draw those individuals involved in the consumer's life. Sample on back of assessment.

Home Environment

Type of Residential Setting:

- independent
- alone or roommate with "drop in" support staff
- alone or roommate with "live in" support staff
- Adult Family Home
- with group home staff and other residents
- with parents
- other (please describe)_____

Total number who live in the home:_____

Number of persons with disabilities who live in the home:_____

Future plans for change in residential setting:_____

_____

Names and relationship of those who live in residential setting (i.e., parents, roommates, siblings, staff):

_____

_____

_____

_____

WORK OPPORTUNITY IN RURAL COMMUNITIES, INC.
FUNCTIONAL ASSESSMENT

As many questions as possible should be answered by the individual being assessed to prioritize their input into the assessment and planning process. These questions were written to be directed at significant others(family, teacher, other service provider, friend) but should be worded differently when talking to the individual with a disability. Different color pens can be used to distinguish who has answered each question as there may be conflicting responses by each individual questioned. Observations across different environments are also needed to gather information from home, school, work and community activities. You will need input from many sources to gather the information that will help in planning support services for individuals with disabilities. This is only one form for that purpose.

Personal Information

Name:_____ Telephone: _____
Address:_____ Date of Birth: ___/___/___
_____ Age: _____
Social Security #:_____-____-_____

Does individual have a Social Security Card or Birth Certificate for the I-9 form (filled out when starting a new job)? _____

Services requested (residential, employment, recreational/leisure, therapy, case management, respite, attendant care, etc.): _____
_____
_____

Family Information

Who is the individual's guardian? Self_____ Other _____
Parent:_____:_____
Address:_____
_____
Telephone (home):(____)_____
Telephone (work):(____)_____

Parent:_____
Address:_____
_____
Telephone(home):(____)_____
Telephone(work);(____)_____

Names and addresses of Siblings:
_____
_____
_____
_____

Will benefits be adversely affected if the person works? At what point?_____

_____

_____

Does the person or their family have any concerns about how work might affect benefits (i.e., are there any disincentives for the person working)?_____

_____

_____

Does the individual require employment with benefits?: _____

Sources of Income: _____

_____

Banking Skills: _____

_____

Transportation

Primary modes of transportation (i.e. walking, biking, bus, car, van):_____

_____

Primary provider of transportation;_____

_____

Has the person ever used public transportation?_____Any barriers?_____

_____

_____

Describe individual's travel skills in using public transportation, i.e., bus, cab?_____

_____

_____

Describe assistance needed for crossing streets:_____

_____

What skills will individual need to learn to get to and from work?_____

_____

_____

What transportation arrangements will be needed (i.e. walk, bike, drive, family, carpool, paid driver/Transportation Provider, WORC staff.) _____

_____

Communication:

uses sounds/gestures
uses key words/signs
speaks with difficulty
communicates clearly in sentences/signs
uses alternative communication system (describe)_____

How does the person respond to simple "social" questions (i.e., "Hi""How are you?" "How was your weekend?"

How does the person respond to simple requests or directions?

Medical Information:

Name of Physician:_____

Address:_____

_____ Telephone: (___)_____

Hospital:_____

Type of Insurance;_____

Insurance Number:_____

Recurring Health Conditions:_____

_____

_____

AODA Issues _____

_____

Chronic Health Conditions:_____

_____

_____

Does the individual have any allergies?____no ____yes

If yes, describe what they are and procedural instructions for dealing with reactions:_____

_____

_____

Does the individual have a seizure condition? ____no ____yes

If yes, describe the seizures and procedural instructions for supporting the individual through them:_____

_____

_____

Is the person on any type of medication? ____no ____yes

If yes, please provide the following information:

Type of Medication/ Prescribed for/ Dosage (amt. and time)/ Side Effects

_____

_____

_____

_____

_____

Who sets up all medical appointments?_____

_____

Primary Disability _____

Secondary Disability_____

Financial Information

Is the individual receiving SSI? SSDI? Medical Assistance? Medicare? If possible, information relating to the amount of benefits being received would be helpful to obtain (with the individual's permission)._____

Does the person receive Physical or Occupational Therapy? List name and telephone number:_____

Endurance:
What are the recommendations for number of hours individual will be able to work initially or over time?

How often are breaks needed?

Strength:Lifting and Carrying:
What, if any, are the individual's weight limits in lifting and carrying objects?

Orientation/Mobility Skills:
Describe the person's overall sense of direction (e.g., finding a building or a floor/room in a particular building; following a route from their home to the bus stop; locating the breakroom, bathroom, lunchroom at their worksite).

For persons who use a wheelchair, describe how independent they are in moving/maneuvering in wide open spaces (e.g., down sidewalks, hallways) and in more confined spaces (e.g., offices, restaurants).

Learning Style/Academics
How does the individual seem to receive and process information (auditory, visual, kinesthetic, i.e., "by doing")?_____

What methods seem to work best when teaching a new skill): _____
_____
_____

What is the best method for correcting mistakes that the individual might make? Does s/he learn from their mistakes?_____
_____

What are the individual's short-term and long-term memory skills (across a given day, consecutive days, weeks, months)?

Does the individual seem to understand good natured kidding and teasing from others?

How much does the person pay attention and react to others around him/her?

Does the person receive speech/language services? Give name and telephone number of provider:_____
Telephone use:_____
_____

Sensory Information:
Are there any sensory limitations?

List adaptations used that are related to sensory disabilities:_____
_____

Does person receive sensory impairment related services? List name and telephone number of the provider:_____

Physical Information
Does person have limitations with use of hands, arms, legs, feet, head or neck? Please Describe:

Describe person's capacity to grasp, hold and manipulate small objects (buttons, money, screws, etc.):

Are there specific procedures used for positioning? Describe:

Are there restrictions on the types or amount of activities in which the person can engage? Describe:

List adaptations used that are related to physical limitations:_____
_____
_____

Writing Skills:
What are the extent of the individual's writing skills? Prints or writes? With or without model) i.e., can s/he copy information?

Time Telling: unaware of time and clock function
identifies breaks and lunch
can tell time to the hour
can tell time in hours and minutes

Can individual tell time from both a "clock face" and digital watch/wall clock/clock radio?_____

Does individual demonstrate time "awareness" (e.g., responds to time by initiating leaving/stopping work, taking a break, turning on or changing channels on TV to watch preferred program; understands concepts of "early" "on time" and "late").

Describe any adaptions that the individual uses with regard to time telling and/or scheduling:___

Math/Money Skills:
Math: none
simple counting
simple addition/subtraction with or without calculator?
complex computational skills

To what extent does the individual demonstrate an accurate understanding of what money can be used to buy?

To what extent does the person identify and utilize money to make purchases for him/herself and/or others (i.e., stores, breaks, lunch purchases)?

Who handles the individual's money?

Describe any adaptations that are used with regard to money handling and/or purchasing?

Does individual have a checking account and use a checkbook? With or without adaptations?

What seems to interfere with the individual being able to learn new skills?

Learning preferences:

solitary activities	group activities
sedentary	active
visual	auditory
tactile	

Is individual able to follow more than 1 step verbal directions? 2 steps? 3 steps?

What are the individual's greatest strengths?

Examples: Assuming responsibility?
Social interactions?
Physical strength and endurance?
Attention to details
Attention to the job
Responses well to correction/criticism

What are the individual's weaknesses?

Reading:

none	sight words/symbols
simple reading (1-2 grade)	functional reading (3-6 grade)

To what extent does the person use reading skills to (write on back on sheet):

gather information (locate correct bathroom, bus)
engage in leisure activities (reads magazines, book; board games that involve reading, reading CD cover)
completes task (fill out application, read recipe, assemble objects, shopping list)
Describe any adaptions (e.g., picture reading list) client uses to circumvent reading limitations

If individual is unable to read, can s/he "read" and follow sequential pictorial directions to complete a task?

Meal Planning skills (balanced, ability to prepare) _____
_____

Meal Preparation skills (follow recipes, use of oven/microwave)_____
_____

Food Cleanup and Storage _____

Social Skills/Interactions:
Does individual respond appropriately to conversations, questions and comments from others?_____
Does the person like to be around people or prefer to be alone? _____
_____

What social networks does the individual currently have, (i.e. who are important people in their lives)?_____
_____

What type of connections does the person have that provides them with social interactions with people who live in the community? (i.e. church, bank, regular restaurants, clubs)____
_____
_____

Future's Planning Profile Map can be used to visually gather information about the person's connections with the community. Copy at the back of this assessment.

What types of social/leisure activities are preferred by the individual (what activities does the individual enjoy doing when his/her time is not structured? _____
_____
_____
_____
_____

Behavioral Issues
Describe unique behavioral characteristics that may draw attention to the individual in community settings:

Describe interfering/aggressive actions:

Are there any challenging behaviors that may interfere with job performance?

Self-Care Skills:
Does individual need an attendant? _____

Personal hygiene:
cleanliness/body odor
clothing
shaven/hair washed/teeth brushed

Does individual independently perform personal hygiene tasks or pick out own clothing?

_____

_____

Clothing Care (repair, laundry) _____

_____

Housekeeping (schedules, appearance, decorating) _____

_____

Shopping Skills:_____

_____

Safety Responses (who to call, dangerous situations, locking dooors, fire alarms) _____

_____

_____

Does individual need assistance when using the bathroom?_____

_____

Are they on a schedule for this assistance?_____

_____

Does individual need assistance during menstrual cycle? _____

_____

Sexuality (knowledge, behavior, attitude, relationships):_____

_____

Diet
Does the individual have dietary restrictions? Describe:_____

_____

_____

Describe the level of assistance needed while eating and drinking, list types of adaptions used if any:_____

_____

_____

List food and beverage preferences:_____

_____

_____

List food and beverage dislikes:_____

_____

_____

Educational History

High School attended? Graduated? _____

_____

Post Secondary Education? Degree? _____

_____

Other training opportunities? _____

_____

Favorite courses in school? _____

_____

Work History

Where has the person worked before? *(List on separate sheet).*

type of business (name, address, telephone, supervisor)

tasks performed	summary of performance
transportation	hours
wages	how was job obtained?
how long employed?	reason for leaving?
relationships established	positive aspects of job

Was the support provided:

adequate
inadequate
more than may have been needed

Who provided past support?_____

How long was is provided?_____

Describe the nature of support that was provided or may need to be provided in order to maintain community employment:_____

_____

_____

_____

_____

_____

Were past jobs good matches for the person? Why or why not?:_____

_____

_____

_____

_____

_____

Work Skills (on time, attendance):_____

_____

Does the individual have independent job seeking skills?_____

_____

_____

Describe intervention strategies:

Does person receive Psychological, Psychiatric, Counseling or Behavioral related services? Give name and telephone number of provider;_____

_____

What motivates individual? What are positive reinforcers for this individual?

Does individual wait for directions or initiates to next task independently? Are frequent prompts required, if so what kind?

How many step task can individual perform independently, with adaptations or with coworker instruction?

How does individual adapt to change?

How does individual behave in familiar and unfamiliar environments?

Handling Criticism/Stress

resistant/argumentative
withdraws into silence
accepts criticism/does not change
accepts criticism/changes behavior

Ability to take direction from a variety of persons:

How does individual indicate how they're feeling (e.g., happy, sad, angry, scared)?

MADISON AREA REHABILITATION CENTERS, INC.

2001 W. Broadway
Madison, WI 53713
(608) 223-9100
Dr. Jill Wheeler, Director

FUNCTIONAL ASSESSMENT for _____

Person Responsible for Compiling Information: _____

Date of Initial Completion: _____

REVISED/REVIEWED:
(circle one)

Date: _____ By: _____

Date: _____ By: _____

Date: _____ By: _____

Date: _____ By: _____

Date: _____ By: _____

Individual Preferences:

What job(s) in the past have been particularly successful for the individual? Why?

_____

_____

_____

_____

What jobs in the past have *not* been particularly successful? Why?

_____

_____

_____

_____

To Individual: What type of work would you like to do?

How many hours would you like to work?

Does the individual seem to enjoy activities that involve:

Significant or minimal gross motor activity
Significant or minimal fine motor movement
Environment with many people or very few people
same-age peers, older, or younger people
Significant visual and auditory stimulation or very little stimulation
Preference for warm/cold environments

What career clusters has the individual shown high interest even if he/she has not had an opportunity to be employed in that type of job?

Additional Comments:

efforts. For this reason, completion or revision of the FA should always precede job development. The FA should also be used in conjunction with completing the Quality Indicators Scale during ISP and other planning meetings to evaluate progress in supported employment and to generate objectives for subsequent time periods.

A secondary use of the FA is as a tool for communicating relevant information about clients as they move between MARC Centers, to other supported employment agencies, or experience changes in residential support agencies.

INTRODUCTION

The Functional Assessment (FA) Outline should be utilized when an individual is referred for supported employment at MARC. In order to secure the most appropriate job match for an individual, the FA should be completed prior to job development. The FA should be comprehensive and include current and relevant information in at least the following content areas:

I. Individual Preferences
II. Individual Strengths
III. Work History
IV. Functional Use of Academics
V. Following Directions
VI. Behavior
VII. Learning Style
VIII. Social Skills/Interactions
IX. Communication Skills
X. Work Endurance/Stamina
XI. Medical/Physical Status and Management
XII. Orientation/Mobility Skills
XIII. Fine and Gross Motor Coordination Skills
XIV. Work-Related Skills/Concerns
XV. Transportation Needs
XVI. Current financial Information and Concerns
XVII. Special Consideration/Support Needs
XVIII Recommendations

FUNCTIONAL ASSESSMENT DEVELOPMENT

Information contained in the FA should be gathered from the client, from significant others in the client's life, and from observations of the client in community settings. The individual completing the assessment should make an effort to seek a variety of community and work settings from which information can be gathered. Guidelines from the Division of Vocational Rehabilitation (DVR) suggest that a minimum of 80% of the assessment be conducted in community-based (i.e., not simulated or facility-based) environments.

Upon completion, each client's FA should be shared with Dane County Human Services, parent(s)/guardians, other relevant MARC staff, and the residential provider. The FA should be reviewed and/or revised on an as-needed basis, but no less than once/year. The initial page of the FA outline includes an area to indicate who completed the review/revision as well as the date of the review. Each revision need not be kept on file, but the original FA should be kept intact and on file to provide a history.

USE OF FUNCTIONAL ASSESSMENT

The primary use of the FA is as a guide in job development

____ with foster parents

____ with group home staff and ____ other residents

____ with parents

____ other (please describe)

If consumer is in a supported living situation, what agency provides support and supervision: _____

Emergency Information:

Consumer's Doctor: _____

Address: _____ Phone: _____

_____

Hospital: _____

Medical Information:

1. Does the consumer have any allergies: ____ no ____ yes

   If yes, describe what they are and procedural instructions for dealing with reactions.

2. Does the consumer have a seizure condition: ____ no ____ yes

   If yes, describe the seizures and procedural instructions for supporting the consumer through them.

3. Is the consumer on any type of medication: ____ no ____ yes

   If yes, please provide the following information:

   Type of Medication Prescribed For Dosage (amount and time)

4. Medical Assistance (MA) ___ yes ___ no. If yes,

   MA # _____ If not, what type of insurance

   does consumer have? _____

COVER SHEET

Person(s) Involved in Conducting
Individualized Assessment:

	Name	Position/Relationship
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Locations/Environments Where Information Was Gathered:

1. _____
2. _____
3. _____
4. _____
5. _____

General Information

Consumer: _____

Address: _____

Phone: _____ D.O.B.: _____

Parent/Guardian: _____

Address: _____ Phone: _____

Social Security #: _____

Residential Information

Consumer lives: ____ independently

____ alone with "drop in" support staff

____ with "live-in" support staff

7. How long employed?
8 Reason for leaving
9. Relationships established

B. Were past jobs good matches for the consumer? Why or why not?

IV. FUNCTIONAL USAGE OF ACADEMICS

A. To what extent does consumer use **reading skills*** to:

1. gather information (e.g., locate correct bathroom, bus, entrance/exit, checkout lane, etc.)

2. engage in leisure activities (e.g., reads newspaper/magazines/books; engages in board/video games that involve reading; makes music selections by reading album/cassette/cd cover)

3. complete task (e.g., fill out application; reads simple directions to prepare meals, complete work tasks, assemble objects, secure items from shopping list, locate correct time card, elevator etc.)

4. Describe any adaptations (e.g., picture reading list) consumer uses to circumvent reading limitations.

*Refers to use of both written words and numerals

B. **Time telling skills**

1. Is consumer able to tell time from both a "clock face" and digital watch/wall clock/clock radio?

2. Does consumer demonstrate time "awareness?" (e.g., responds to time by initiating leaving/stopping work/taking a break, going to lunch at appropriate times; turning on or changing channels on TV to watch preferred program; getting up on time; getting to places on time; understands concepts of "early," "on time" and "late."

3. How are events scheduled for consumer during the day?

4. Does consumer regularly wear and utilize a watch?

5. Does consumer know sequence of days/week; months/yr. Can s/he utilize a calendar to predict or schedule events?

SUPPORTED EMPLOYMENT
FUNCTIONAL ASSESSMENT CONTENT AREAS

I. INDIVIDUAL PREFERENCES

A. What does consumer seem to enjoy doing when his/her time is not being structured for him/her?

B. What job(s) in the past have been particularly successful for the consumer? Why?

C. What job(s) in the past have not been particularly successful for the consumer? Why?

D. Does the consumer seem to enjoy activities that involve:

1. alot or minimal gross motor movement
2. alot or minimal fine motor movement
3. alot of people or very few people
4. same-age peers, older, or younger people
5. alot of visual and auditory stimulation or very little stimulation

II. INDIVIDUAL STRENGTHS

A. What does the consumer do well?

B. Does the consumer have particular strengths in any of the following areas:

1. assuming responsibility
2. social interactions
3. fine motor coordination (i.e., pinch, grasp, manipulation of small objects)
4. gross motor coordination
5. physical strength and endurance
6. attention to task
7. attention to details
8. responding favorably to correction/criticism

III. WORK HISTORY

A. Where has the consumer worked before?

1. Type of business
2. Tasks performed
3. Transportation
4. Hours
5. Salary
6. Level of support provided

VI. BEHAVIOR

A. Describe consumer's behavior with regard to:

1. age-appropriateness
2. appropriateness to situation and location
3. interfering with work tasks
4. ability to engage others in social interactions
5. ability to initiate and respond to social interactions

B. How does consumer indicate how they're feeling (e.g., happy, sad, angry, scared)?

C. Describe any challenging behavior(s) that have not been covered above and that are potentially dangerous either to the consumer or to others.

D. What precipitates challenging behavior(s) and what are strategies for either preventing or coping with behaviors?

VII. LEARNING STYLE

A. How does consumer seem to receive and process information (auditory, visual, kinesthetic, i.e., "by doing")?

B. What methods seem to work best when teaching consumer a new skill?

C. What is the best method for correcting mistakes that the consumer might make? Does s/he learn from her/his mistakes?

D. What seems to interfere with consumer being able to learn new skills?

E. What is the consumer's capacity to retain information?

1. short-term memory skills (across a given day or consecutive days)

2. long-term memory skills (across weeks, months, years)

VIII. SOCIAL SKILLS/INTERACTIONS

A. Does the consumer readily engage others in conversations?

B. Does the consumer respond appropriately to conversations, questions, and comments from others?

6. Describe any adaptations that the consumer uses with regard to time telling and/or scheduling.

C. Money Skills

1. To what extent does the consumer demonstrate an accurate understanding of what money can be used to buy? i.e., is money meaningful to consumer? is receiving a paycheck meaningful to consumer?

2. To what extent does consumer identify and utilize money to make purchases for him/herself and/or others?

3. Who handles consumer's money?

4. Describe any adaptations that the consumer uses with regard to money handling and/or purchasing.

D. Writing Skills

1. What are the extent of the consumer's writing skills? Prints or writes? With or without model? (i.e., can s/he copy information?)

2. How does consumer use writing skills on a daily basis? (e.g., writes letters, leaves telephone messages, writes shopping lists, uses checkbook, etc.)

3. Can consumer complete their own job applications independently or would they need assistance?

4. Describe any adaptations consumer uses with regard to writing skills.

V. FOLLOWING DIRECTIONS

A. Is consumer able to follow more than 1-step verbal directions? 2-steps? 3-steps?

B. If consumer is able to read, can s/he follow simple written directions to complete a task?

C. If consumer is unable to read, can s/he "read" sequential pictorial directions to complete a task?

D. Does consumer understand basic spatial concepts (e.g., in, on, under, next to, left/right, in front of etc.)

2. How easy is it for others to understand the consumer?

-those familiar with person
-those unfamiliar with person

3. Can consumer participate in interview process?

X. WORK ENDURANCE/STAMINA

A. Are there any limitations on the amount or type of work that the consumer can do?

B. If there are limitations, are they based on medical conditions or the result of other decisions?

C. What type of a work schedule would be reasonable and desirable for the consumer.

XI. MEDICAL/PHYSICAL STATUS AND MANAGEMENT

A. Describe the consumer's current medical condition and how it does or doesn't impact upon his/her ability to work

B. List any medications the consumer is currently taking, why they have been prescribed, and how effective they are currently.

C. Discuss any side effects of medication, particularly as they may relate to work.

D. Describe any hearing and/or visual impairments and how they may impact on work.

XII. ORIENTATION/MOBILITY SKILLS

A. External

1. Describe the consumer's overall sense of direction (e.g., following a route from their home to the bus stop; being able to walk from bus stop to workplace; locating correct stop to exit bus for work etc)

2.Describe the consumer's mobility skills (i.e., how independent is client in crossing controlled and uncontrolled intersections; in walking outside during different types of weather).

3.For consumers who use a wheelchair, describe how independent they are in moving/maneuvering in wide open

C. What types of things seem to encourage the consumer to interact with others?

D. Does the consumer like to be around people or would they prefer to be alone most of the time?

E. What social networks does the consumer currently have? i.e., who are important people in their lives?

F. What type of community connections does the consumer have that provides them with opportunities to socially interact with people who are not disabled?
(e.g., church, recreation groups, neighborhood parks, clubs, regular visits to restaurants, grocery stores, banks, etc.)?

IX. COMMUNICATION SKILLS

A. Receptive skills

1. How does consumer respond to simple "social" questions (e.g., "Hi," "How are you?" "Where are you coming from/going to?" "How was your weekend?")

2. How does consumer respond to simple requests or directions?

3. Does the consumer seem to understand good natured kidding and teasing from others?

4. Does the consumer have any diagnosed hearing or visual impairments?

5. How much does the consumer pay attention and react to the how others around him/her are acting or reacting to circumstances (including their own actions)?

6. Can consumer participate in interview process unassisted?

B. Expressive skills

1. How does the consumer communicate expressively?
-verbal words, phrases, or sentences
-gestures, sign language
-combination of verbal and non-verbal means
-uses alternative communication system (describe)

work or en route to work?)

XV. TRANSPORTATION NEEDS

A. How does the consumer currently access their job?

B. If consumer is not using public transportation, explain why this decision was made.

C. What are potential methods for the consumer to access a job in the future?

D. Will the consumer need assistance/training in learning to utilize other transportation systems?

XVI. CURRENT FINANCIAL INFORMATION AND CONCERNS

A. Is the consumer receiving SSI? SSDI? If possible, information relating to the amount of benefits being received would be helpful to obtain with the person's permission.

B. Will benefits be adversely affected if the consumer works? At what point? (e.g., SSDI)

C. Have IRWEs or PASSs been submitted for the consumer? If so, for what expenses and when are they due for review?

D. Do the consumer or their family have any concerns about how work might affect benefits i.e., are there any disincentives to the person working?

XVII. SPECIAL CONSIDERATION/SUPPORT NEEDS (Long and Short term)

Describe the nature of support that the consumer would need (both work and work-related) in order to maintain community employment. i.e., get a sense of what type of placement options (individual vs small group) an individual would do best in; how much direct support will be necessary--initially and ongoing; what type of support would be best?

XVIII. RECOMMENDATIONS

What would you recommend as the ideal job for the consumer?

A. Type of task(s)
B. Work environment
C. Hours
D. Level of support
E. Anticipated rate of pay

spaces (e.g., down sidewalks) and in crossing streets.

B. Internal

1. Describe the consumer's overall sense of direction (e.g., locating a floor/room within a building; locating the breakroom, bathroom, lunchroom at their worksite; moving between several work areas)

2. Describe the consumer's mobility skills (e.g., how well does person move through an area from point (a) to point (b)

3. For consumers using wheelchairs, describe how independent they are in moving/maneuvering in more confined spaces (e.g., offices, restaurants, bathrooms etc)

C.Refer to Dane County Mobility Specialist for further evaluation if necessary.

XIII. FINE AND GROSS MOTOR COORDINATION SKILLS

A. Describe the consumer's capacity to grasp, hold, and manipulate small objects (e.g., money, buttons, nuts/bolts/screws, parts).

B. What is the person's dominant hand?

C. Describe any limitations and/or concerns relating to gross motor movement, particularly as they might affect work (e.g., head control, positioning, posture)

XIV. WORK-RELATED SKILLS/CONCERNS

A. Can the consumer get from home to work independently and on time?

B. Describe the consumer's personal hygiene and their capacity to maintain acceptable hygiene while at a worksite (e.g., bathroom skills, ability to clean hands and mouth following lunch, ability to control drooling)

C. Describe the consumer's ability to take a break while at work (e.g., communicate with coworkers, occupy his/her time well, use money to make purchases, return to work on time etc.)

D. Describes what motivates the consumer to initiate and complete a task or activity. (i.e., what seems to be reinforcing for the person?)

E. Describe the consumer's problem solving skills (e.g., can they relate their address and telephone numbers upon request? What are they likely to do if they miss a bus? How do they seek assistance if problems arise at

Physical Limitations:

a. Arms, hands: _____

b. Legs, feet: _____

c. Head, neck: _____

d. Other(Physical capacities, Prothetic/Assistive Devices): _____

_____

Prior Work Experience(paid or unpaid)/Skills: _____

_____

_____

_____

Communication Information:

a. Receptive Communication (primary ways trainee receives information):

____spoken words of others ____line drawings ____Manual signs ____gestures

____written/printed words ____tactile contact with objects ____photos/magazines

____watching others demonstrate ____other: _____

b. Expressive Communications (ways trainee communicates information to others):

____with spoken words ____facial expressions ____with manual signs

____looking at an object ____pointing to/touching objects

____by pointing/touching picture ____by looking at a picture of an object

____communicative device (board, speech synthesizer, etc)

____other: _____

Type of Residence Transferred From:

____independent institution ____group home (CBRF)

____foster home ____supported apartment ____home with parent/relative

Transportation: Valid drivers license? ____yes ____no

Able to access public transportation? ____yes ____no

Comments on transportation needs: _____

_____

Residential Care for Developmentally Disabled, Inc.

General Offices
424 Washington Avenue
Oshkosh, WI 54901

Regional Office
1548 Western Avenue
Green Bay, WI 54303

Intake Interview for Prevocational Services

Client Name: _____ Date: _____

Address: _____ Telephone: _____

_____ Referral Source: _____

Disability/Diagnosis: _____

Funding Source: _____ Referral Counselor: _____

Interviewer: _____ Title: _____

Primary Goal/Objective in Prevocational Services: _____

_____

Secondary Goal/Objective(s): _____

_____

_____

Job Likes	Job Dislikes
_____	_____
_____	_____
_____	_____

Area(s) of Interest/Preference: _____

_____

Work Hour Preferences (specify AM, PM, days of week): _____

_____

Present Income/Source(s)/Benefits: _____

Specific positioning needs when sitting, riding, standing, lying down, if any: _____

_____

_____

Intake Interview for Prevocational Services - Page 4.

Emergency Contact:

Name: _____ Telephone: _____

Address: _____ Relationship: _____

_____

Comments/Recommendations: _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Interview conducted by: _____ Title: _____

Interview Date: _____

Medications/Precautions/Allergies: _____

_____

_____

Hospitalization within the last year (list diagnosis): _____

_____

Personal Physician: Name: _____ Telephone: _____

Ever convicted of a felony (list charge)? _____

Regular recurring vacations, appointments or family visitations: _____

_____

Describe challenging or problem behaviors: _____

_____

_____

_____

Describe problems in prior institutional setting: _____

_____

_____

Describe problems in prior residential setting: _____

_____

_____

Other Community Support Systems (list Agencies, Counselors): _____

_____

Recreational Information:

Most preferred leisure activities: _____

_____

Least preferred leisure activities: _____

_____

Description of seizure: _____

_____

_____

Interventions: When: _____

Type of: _____

_____

_____

Medication: _____ Yes _____ No

Type of medication: _____ When it is received: _____

_____ _____

_____ _____

Vision and Hearing Information:

Vision:

Consumer is - Blind: ____ Low Vision: ____ Sighted: ____

Description of disability: _____

_____

_____

Aides/assistance needed: _____

_____

_____

Other vision information: _____

_____

_____

Residential Care for Developmentally Disabled, Inc.

General Offices
424 Washington Avenue
Oshkosh, WI 54901

Regional Office
1548 Western Avenue
Green Bay, WI 54303

SUPPORTED EMPLOYMENT PROGRAM

INDIVIDUAL CONSUMER ASSESSMENT DATA

Date: _____

Person Completing Form: _____

General Information:

Consumer: _____ Consumer Information No.: _____

Address: _____

Parent/Guardian: _____

Home Phone Number: _____ Parent/guardian work ph. # _____

Other General Information: _____

Emergency Information:

Consumer's Doctor: _____ Phone number: _____

Hospital: _____ Phone number: _____

Other Emergency Information: _____

Medical Information:

Allergies:

_____

_____

_____

Procedural Instructions:

_____

_____

_____

Seizures: _____ Yes _____ No

Describe any adaptation the consumer uses: _____

_____

_____

Other mobility or motor information: _____

_____

_____

Break Information:

Eating skills: Independently: ____ assistance: ____ adaptations: ____

Restricted diet: Yes: _____ No: _____

Type of restrictions: _____

_____

_____

Procedure when assistance is needed: _____

_____

_____

_____

Favorite foods/beverages: _____

_____

_____

_____

Recreation/Leisure Skills:

List recreation/leisure activities the consumer would enjoy during break: _____

_____

_____

Hearing:

Consumer is - Deaf: _____ Partial hearing: _____ Not impaired: ____

Description of disability: _____

Aides/Assistance needed: _____

_____

Mobility and Motor Information:

Walking: Independently: _____ With assistance: _____

Not applicable: _____

Assistance procedure used: _____

_____ _____

_____

Steps: Independently: _____ With assistance: _____ Not applicable: ___

Type of assistance/procedure: _____

_____

_____

Wheelchair consumer: Transfers to chair: _____ With assistance: _____

Transfer procedure: _____

_____

_____

Fine Motor Skills: Limitations: _____ No limitations: _____

If consumer has limitations please note limitations and note movement(s) the consumer has: _____

_____

_____

Behavioral Information:

Unusual behaviors: (describe) _____

_____

Behavioral interventions now used: _____

_____

Reinforcements: _____

Acts/Speaks aggressively: never____ seldom ____ frequently____

Behavioral intervention now used: _____

_____

Reinforcements: _____

Reaction to criticism/stress: (describe) _____

_____

Behavioral intervention now used: _____

_____

Reinforcements: _____

Other behavioral information: _____

_____

Related Skills Information:

Money: Independently uses money: _____ Assistance: _____

Adaptations: _____ _____

Type of assistance/intervention: _____

_____

_____

Adaptation: _____

_____

List recreation/leisure activities the consumer does not like to do:

_____

Other break information: _____

_____

_____

Social Interactions/Communication Information:

Communication system: _____

_____

_____

Consumer's method of initiating an interaction: _____

_____

Adaptation/materials used for initiation of or maintaining interaction: _____

_____

_____

Interaction/communication objectives at the consumer's vocational site: _____

_____

_____

Consumer's method of making a choice: _____

_____

_____

Associations or links in residence or community: _____

_____

_____

Endurance: works less than 1 hour w/o break:____ 1 - 2 hrs w/o break:____

2 - 3 hrs w/o break:____ over 3 hrs w/o break:____

Strength/Lift & Carry: sedentary (0-10 lbs):____ light work (10-20 lbs):____

medium work (30-50 lbs):____ heavy work (over 50 lbs):____

Adapting to Change: (comments) _____

_____

Perserverance/Attention to Task: (comments) _____

_____

Orientation Skills: (comments) _____

_____

Initiative/Motivation: (comments) _____

_____

Object Discrimination (can consumer distinguish between ordinary work supplies, etc.): (comments) _____

_____

Pedestrian Safety: (comments) _____

_____

Preference Information:

List jobs consumer likes/enjoys: _____

_____

List jobs consumer dislikes: _____

_____

Additional comments: _____

_____

Time: Independently: _____ Unable to tell time: _____

Working on:

Hourly: _____

Half hour: _____

15 minute intervals: _____

5 minute intervals: _____

Adaptations (if any): _____

_____

_____

Reading: Functional reading skills -

none:____ sight words/symbols:____ simple reading:____ fluent:____

Objectives at the vocational site: _____

_____

_____

Adaptations: _____

_____

Math: Functional math skills -

none:____ simple counting:____ simple add'n/subt'n:____ computat'n:____

Objectives at the vocational site: _____

_____

_____

Adaptations: _____

_____

Parent(s)/Guardian preferences

List job parent(s)/guardian want the consumer to do:

_____

_____

_____

List job parent(s)/guardians do not want the consumer to do:

_____

_____

_____

Other preferences information: _____

_____

_____

_____

Financial Considerations:

Check all that apply to the consumer as of date, and enter amounts where appropriate.

___ SSI $_____

___ SSDI $_____

___ Soc. Security $_____

___ General Assistance $_____

___ Medical Assistance $_____

___ Workers' Compensation $_____

___ Other (describe) $_____

_____